

AN APPRAISAL OF THE HEALTH FACILITIES AND PROGRAM
IN THE COCHRAN COLORED ELEMENTARY AND HIGH
SCHOOL, COCHRAN, GEORGIA
1959-1960

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BY
JEAN SMITH THOMPSON

SCHOOL OF EDUCATION
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for him Grant

DEDICATION

To My Husband	Mr. Willie P. Thompson
To My Mother & Father	Mr. & Mrs. W. B. Smith
To My Advisor	Dr. Laurence E. Boyd

For their
Encouragement during the period of this research
J. S. T.

ACKNOWLEDGEMENT

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CHAPTER I

INTRODUCTION

Rationale.--We have a knowledge of the developmental needs of all children which indicates that health teaching in the schools will center around the formation and extension of desirable practices, attitudes, and understanding associated with growth, food, rest, sleep, cleanliness, activity, elimination, fresh air, and sunshine and several others that are important in the well being of all children.

Health is important to all children, for it is the foundation upon which they must depend to a large extent for achievement, success, and happiness in life. The truly healthy child is not only free from the drains of physical defects, disease, fears, and irrational behavior, but he looks healthy. The health of the individual affects everything he does; and everything he does from birth to death influences his health.

The child with good health seems to be better adjusted socially, and he is able to do better work in school than the child whose health is poor. The child who has good health is the one who has an abundance of energy and whose body organs are functioning efficiently.

Children should be able to attend schools with healthy environments. The total environmental situations are of tremendous importance for achieving favorable habits. It will serve as an example of a healthful environment which will carry over into the home and community and result in better health facilities in the entire community including the school.

In planning for a healthful school environment all of these things play an important part:

The heating and ventilation, the temperature, humidity movement and cleanliness of the air should be maintained at desirable standards. Emphasis should be placed on the cleanliness of classrooms, toilets, and playgrounds.

Facilities should be available for pupils to wash their hands with soap and clean water before eating and after using the toilets.

The source of the school water supply and the methods of distributing the water to the persons who drink it should be carefully protected in order to protect pupils and teachers from water-borne diseases.

The school should strive to provide school children with well balanced lunches of high nutritive value carefully and wholesomely prepared under sanitary conditions.

Safety against fires and other accidents should be

provided. Further consideration should be given to classroom desks, and seats, classroom lighting and acoustics, rest quarters, and facilities for activity and play would also be considered.

Provisions for healthful school living might also include attention to the total school program not only in relation to physical health but also in the effects of the total curriculum of total health. Moreover, attention should also be given to ever changing teacher-pupil relationships, particularly in the aspect which is called "mental hygiene of the classroom."

No matter who the child is or what he does, good health is his greatest asset; with it he can accomplish much, but without it he will have difficulty in fulfilling his ambitions.

Evolution of the Problem.--The desire to do a study in this problem area grew out of a need to investigate the health problems of the Cochran Colored Elementary and High School, Cochran, Georgia, and to identify the present health practices; it also evolved out of a belief that improvements could be made where necessary in the light of present-day accepted practices.

Contribution to Educational Theory and Practice.--This study revealed important information concerning the current

health practices in Cochran Colored Elementary and High School, Cochran, Georgia, and to point out more fruitful approaches to the needs, the modifications and improvements of the health program. It should bring to light information concerning the unparalleled importance of health in our daily lives.

More specifically, the probable contributions and educational theory and practice of this study are identified below:

1. Stimulating the school living needs for which the school might take the responsibility.
2. Stimulating the school to a fuller evaluation of its facilities and program of healthful school living practices.
3. Determining the present practices of the healthful living aspects of the school health education of Cochran Colored Elementary and High School.
4. To provide the basis for a comprehensive appraisal and evaluation of the health facilities, instruction, and services of the Cochran Colored Elementary and High School, Cochran, Georgia.

Statement of the Problem.--The problem of this study was concerned with developing an appraisal of the health facilities and program found in operation in the Cochran Colored Elementary and High School, Cochran, Georgia 1959-1960, with emphasis on building, construction maintenance, location and overall facilities.

Limitation of the Study.--This study was confined to an

appraisal but was not basically concerned with a measurement of the effectiveness of the health facilities and program in the Cochran Colored Elementary and High School, Cochran, Georgia.

Purposes of the Study.--The primary purpose of this study was to determine the status of the facilities and program for Cochran Colored Elementary and High School, Cochran, Georgia. The specific purposes of the study are characterized as follows:

1. To determine the present facilities for healthful school living aspects in the Cochran Colored Elementary and High School, Cochran, Georgia.
2. To determine the nature of selected aspects of the program for healthful living in the Cochran Colored Elementary and High School, Cochran, Georgia 1959-1960.
3. To determine the extent to which the health education program in the Cochran Colored Elementary and High School is meeting the needs of the school in promoting growth and development.
4. To determine the unmet healthful school living needs if any, for which the administration and staff may assume cooperative responsibility.
5. To stimulate the school staff and pupil personnel to a more diligent awareness of the desirable facilities and program of healthful school living practice in the Cochran Colored Elementary and High School.
6. To formulate whatever implications, if any for educational theory and practice as may be derived from the data.

Definition of Terms.--The terms which were used throughout this research are defined as follows:

1. The term, "Health", as used in this study, refers to that quality of life that renders the individual fit to live most and serve best. "Health" in the research is also used to mean that subject in the classroom which deals with instructing one how to care for his body to attain physical fitness.¹
2. The term, "Healthful School Living", as used in this study designates the provision of a safe and healthful school day, and the establishment of interpersonal relationships favorable to the best emotional, social, and physical health of pupils.²
3. The term, "School Health Program", as used in this study, refers to the school procedures that contribute to the school procedures that contribute to the understanding, maintenance, and improvement of the health services, health education and healthful school living.³

Locale and Period of Study.--The locale of this study was in Cochran, Bleckley County, Georgia, on U. S. Highway 129 approximately 40 miles Southeast of Macon, Georgia. Bleckley County is in the Southeastern section of the state. It is a predominately agrarian county with the chief products being livestock, cotton, corn, and oats. However, income from livestock has increased more in recent years than from crops.

¹American Association of School Administrators, Health in School, D. C.; National Association, 1944, p. 2.

²Irwin Johnson, Methods and Materials in School Health Education (St. Louis: C.V. Mosby Company, 1956), p. 21.

³Ibid.

Bleckley County covers 219 square miles making it the 134th in size in the state. Bleckley has slightly more rural than urban residents. The population of Bleckley County is 9,200 of which 6440 or 70 per cent are white and 2,760 or 30 per cent are Negro.

The enrollment of the Cochran Colored Elementary and High School is 432. Of this number 305 pupils are in the elementary department, 26 in the junior high department, and 101 in the senior high department.

There are eight teachers in the elementary department and six teachers in high school making a total of fourteen teachers, all of whom hold high levels of certification.

Period of Study.--This research was conducted during the 1959-1960 regular school year at the Cochran Colored Elementary and High School, Cochran, Georgia.

Method of Research.--The Descriptive-Survey Method of Research, employing the techniques of the questionnaire, the structural interviews, records, checklist and observation, was used to gather the data necessary for this study.

Subjects.--The subjects involved in this study constituted the, educational personnel of the Cochran Colored Elementary and High School. This personnel consisted of 432 pupils, fourteen teachers, one principal, one custodian, one dietitian and two cafeteria helpers.

Description of the Instruments.---The research instruments used to collect the necessary data for this study were: (a) two specifically designed questionnaires, (b) documentary analysis of official school records, and (c) interviews with the school and (d) interviews with the school and community population wherever indicated.

There were two types of questionnaires, namely: (a) The State Department of Education's Appraisal of the Health Program in Schools and (b) Teacher-Personnel and Healthful School Environment, which were used in this study. The Appraisal of the Health Program in Schools was designed for the health program in the schools and it consisted of questions in the area of appraisal of (1) Organization and Administration of the School Health Program such as: Personnel, Evaluation Procedure, In-Service Training and the Health Program; (2) The scope of the School Health Program such as: Health-School Community Environment, Health Service, Physical Education and Recreation, Health Instruction and Special Education.

The questionnaire on Teacher-Personnel and Healthful School Environment was designed for the teachers and was concerned with the most important problems in the area of Healthful School Living such as: (a) Teacher qualifications

and procedures; (b) general information on lunchroom, personnel, services, and certifications; (c) pupil-teacher relationship, discipline, individual differences and "fatigue-climate".

Procedure.--The procedural steps used in the conduct of this research were as follows:

1. Permission was requested and granted by the proper school officials to conduct this study.
2. The literature pertinent to this study was reviewed, analyzed and summarized for inclusion in the thesis copy.
3. A specifically designed questionnaire was constructed under competent direction of University staff member.
4. The questionnaire was administered to the subjects, that is, the educational personnel of the Cochran Colored Elementary and High School which participated in the study.
5. The data from the questionnaire were tabulated, analyzed and interpreted.
6. On the basis of the findings, conclusions, implications and recommendations were formulated for inclusion in the thesis copy.

Related Literature.--In reading the literature pertaining to health principles and practices in the schools, many important facts have been revealed. Good health is essential to every individual and especially to youth who are being developed into useful citizens. The reasons usually given for health teaching in the schools are the desire for healthy minds in healthy bodies, the avoidance of waste in education

from preventive sickness and lowered vitality, and education for citizenship, with health as one of its accompaniments. The commonly stated objective of health instruction is healthful living.

Educational principles may be helpful in planning a functional health program emphasizing this point. Grout states that:

1. Health teaching should be based on the needs and interests of children and of their families and communities.
2. In health teaching, full consideration should be given to the psychological, sociological, cultural and economic factors which have a bearing upon health behavior.
3. Scientifically sound health facts should be used.
4. Pupils should be given opportunity, commensurate with their level of maturity, to learn through participation in practical problem-solving situations.
5. Health teaching should be an integral part of the school curriculum and should be guided by sound principles of learning.
6. Health teaching should be an integral part of the total school community health program and of other efforts which contribute to the well-being of the individual and society.¹

The school health program represents a major expression of the concern of the community for the health of its

¹ Ruth E. Grout, Health Teaching In Schools (Philadelphia: W. B. Sanders Company, 1954), pp. 12-13.

children. With reference to the scope of the school program of health education, Sharman has this to say:

The school health program should embrace a broad conception of health which includes mental and social health as well as physical health. This includes the effort of the health of the pupils of the general atmosphere of the school situation and environment. It is true also that the sociological problems of the community have a definite effect on mental and physical health.¹

If a good health program is to be carried out, it is the responsibility of the teachers and pupils to promote one that is functional. One authority supporting this idea is Turner who states that:

In a good health program pupils gain a sense of responsibility and respect for the care and proper use of property and the rights of others involved. The difficult task of maintaining a clean school and preventing unnecessary dirt and litter became clear. Pupils realized the contribution to the discomfort of other pupils and possible danger to health by such personal practices as placing lips and mouth in drinking fountains, spitting on floors, marking walls, improper disposal of rubbish, improper use of toilets and sinks. They gain the satisfaction of attractive surroundings, and learn to appreciate a clean wholesome and healthful environment.²

According to Suggested School Health Policies school education should:

¹ Jackson R. Sharman, Introduction To Health Education (New York: A. S. Barnes and Company, 1948), p. 17.

² C.E. Turner, School Health Education (St. Louis: The C. V. Mosby Company, 1957), pp. 202-203.

Provide for healthful school living including attention to the arrangement of the school day and the social and emotional tone of the classrooms as well as to school sanitation and safety.

Provide a coordinate plan of health instruction giving opportunity for experience through which pupils will develop skill in living healthfully and will accumulate and use scientific knowledge relating to the acquirement of improved health, and the cause, spread, and known methods of prevention of certain diseases.

Encourage periodic health examinations developing a plan whereby such examinations will be obtained and a cumulative record of the findings and recommendations will be kept.

Give special attention to those in need of medical or dental care through a follow-up program which will, where necessary guide pupils and parents to sources of medical, dental and other special treatment.¹

A very important factor in a successful school health program is cooperative leadership by education and health authorities. With reference to the importance of a health program Brooks states:

The best health program and the most effective course of study are those built by community leaders and the local school staff in cooperation with health authorities. Such a program should always emphasize the special and individual needs of the children and of the community. Educational principles and policies of procedure in health education may be helpful in promoting and planning a practical and effective health program for the total school community. Emphasis on such principles as early habit formation, repetition in learning, and fresh emphasis on each grade or level

¹ Suggested School Health Policies, "Journal of Health and Physical Education, Vol. II (May, June, 1940), p. 11.

desirable.¹

The provision of healthful living conditions has to do with the physical, mental, and emotional environment of the child while in school.

Factors in the physical environment include maintenance of effective ventilation in the classroom, proper illumination, a safe and abundant drinking water supply, adequate hand washing facilities and sanitary toilets, cleanliness and orderliness of the school plant, safety and fire protection, seats adjusted to the postural needs of their users, and the attractiveness of the school surroundings from an esthetic point of view. The problem of a wholesome mental and emotional environment depends primarily upon the policies and personalities of the administrative and teaching staff.²

The teacher personally is an important health factor. Grooming, manners, and voice are important while ability to maintain stimulating and wholesome pupil-teacher relationships is essential. School environment encompasses every aspect of the school's and community's influence upon the

¹ L. W. Brooks and F. C. Bellman, Health Education In Elementary and Secondary Schools (Kansas City: Kansas State Board of Health, 1945), p. 77.

² Health and Welfare Division Metropolitan Life Insurance Company, The School Health Program n. d.

health of children.¹

A good site well developed and a good building well equipped should contribute positively to the health, safety, and social aspects of the child's life at school.

According to the Guide for Planning School Plants, a site should be chosen that will enable the school to use all available public service facilities.²

According to Suggested School Health Policies:

Every school has a responsibility for providing a healthful environment: physical, social and emotional. Lavatories and handwashing facilities should be adequate and accessible and of appropriate size for the children who use them. There should be ample number of drinking fountains of approved sanitary design and they should always be kept in good working order.³

Provisions should be made for proper heating and ventilation facilities which plays an important part upon the health and comfort of the children.

The Georgia Department of Public Health has recommended "a central heating system of sufficient capacity to maintain a classroom temperature of 68° to 72° F, with individual

¹ Delbert Oberteuffer, School Health Education (New York: Harper and Brothers, 1954), p. 383.

² National Council on Schoolhouse Construction, Guide for Planning School Plants (Nashville: The Council, 1949), p. 18.

³ National Committee on School Health Policies, Suggested School Health Policies (New York and Minneapolis, 1946), p. 11

classroom controls.¹

Consideration should also be given to proper lighting facilities.

It has been stated by Wilson that "proper lighting increases pupil's ability to see clearly and easily; good acoustics minimize distractions and promotes good hearing."²

Consideration should be given to the possibility that school buildings may be used by children and teachers who are crippled. Ramps should be provided to permit wheel chairs to enter buildings, classrooms, and service areas.³

Toilet, lavatory, and drinking fountain facilities will require detailed attention given to number and location of fixtures, with fixture heights adjusted to the age group concerned, and with easily cleanable construction provided.⁴

The food service department of the school has much to

¹ State Department of Education, Environmental Health and the School Plant, Bulletin Eng. 65 (Atlanta, Georgia: Department of Public Health, 1955).

² Charles C. Wilson, Healthful School Living, NEA and AMA (Washington: 1957), p. 59.

³ State Department of Education, Environmental Health and the School Plant, Bulletin Eng. 65 (Atlanta, Georgia: Department of Public Health, 1955).

⁴ Georgia Department of Public Health, School Health Guide Georgia Department of Education, Atlanta: 1955.

contribute to the health and well-being of the school community.

Permanently constructed facilities needed, include conveniently located toilets, lavatories with hot and cold water, soap and individual towel dispensers, lockers or dressing rooms, an approved water source of adequate quantity, an adequate hot water system, an approved liquid waste disposal system, an adequate storeroom, and a fly-proof garbage room. Floors should be smooth, non-absorbent, non-skid, and easily cleanable. Walls and ceiling should be a light color. Kitchen walls should be smooth, washable, and non-absorbent, up to the level reached by splash or spray. All rooms in the food service area should be well lighted and ventilated and all exterior doors, windows, and vents should be screened.¹

With emphasis on improving health practices of children Turner states:

The most valuable element in health education is work with the individual child. A carefully planned and graded general program in health education needs constant adaptation to practices and educational methods. The teacher makes this adaptation in three ways: (1) through making sure that no general classroom activity is ill-adapted for, or injurious to any individual member of the class; (2) through arranging

¹ Georgia Department of Public Health School Health Guide Georgia Department of Education, (Atlanta: 1955).

the sequence and emphasis in health habit training in such a way that prompt attention is given to the most important items; (3) through working privately with individual children.¹

Speaking of mental health and delinquency in the school situation, N. E. Cutts states:

"A child's behavior in the schoolroom is frequently a sign of some maladjustment of his life out of school. It may also be a warning to the teacher of approaching mental ill-health or delinquency."²

Further, Cutts states:

If a majority of these committed to institutions were not cured and able to resume everyday life, it would cripple our civilization if a large number cannot be cured, it stands to reason that in many cases their breakdown could have been prevented. This is our hope and our challenge, and the challenge is directed to the schools: for teachers are in a strategic position to discover maladjustment, and their long continuing association with a child gives them an opportunity to help him straighten out his difficulties.³

According to Turner there are many factors of good health we must notice in our children.

We recognize that the physically vigorous child enjoys a general sense of bodily comfort and well-being. He grows at a reasonably steady pace, making a satisfactory gain in weight from month to month. He possesses an habitually wholesome appetite and clean,

¹ C. E. Turner, School and Health Education, (St. Louis: the C. V. Mosby company, 1949) p. 42.

² N. E. Cutts, Practical School Discipline and Mental Hygiene, (New York: Houghton Mifflin Company, 1944) p. 3.

³ Ibid. p. 4.

red tongue, and a sweet breath. He is energetic, alert, happy and active. He does not become unduly fatigued by a reasonable amount of physical exercise and responds to the invigorating effect of regular periods of rest and sleep. He adapts himself satisfactorily to new situations or to changes in the environmental conditions.¹

Summary of the Related Literature.--Significant excerpts from the theoretical and research literature on Health Education are presented in the statements to follow:

1. Theories and Criteria- Grout states that Health Educational Principles should concern:
 - (a) The needs and interests of children and of their families and communities.
 - (b) Attention given to the psychological, sociological, cultural and economic factors which have a bearing on behavior.
 - (c) Sound health facts.
 - (d) Child instruction through participation in practical problem solving situations.
 - (e) Health teaching as an integral part of the school curriculum.
2. Sharman states that the school health program should embrace a broad conception of health which includes mental and social health as well as physical health.
3. Turner is of the opinion that the basis of health work is that performed with each individual child. He further maintains that the constant supervision of the teacher will insure that no general classroom activities will be injurious to the health of the students.

¹. C. E. Turner, op. cit p. 61.

4. A desirable development of school health education under the favorable influences of good examples of practices of health protection set by the schools and teachers themselves.
5. Brooks states that an effective health program should be planned by community leaders, local school staff as well as health authorities.
6. Children should be able to live healthfully while in school. Consideration should be given to social, physical, mental and emotional environment as well as many of the facilities needed.
7. Turner states that the significant emphasis of the modern school health program has been upon improving health practices of pupils. In another connection Turner states that health habits should be learned by practicing (doing) correct health habits.
8. N. E. Cutts states that a child's behavior in the classroom is frequently a sign of some maladjustment of his life out of school.
9. Turner gives a logical sequence by which the health of the pupils can be maintained and even promoted; and the importance of the teachers being able to recognize signs of physical and mental health or any departure therefrom.

CHAPTER II

PRESENTATION AND ANALYSIS OF DATA

Prefatory Statement.--This chapter is concerned with the presentation and analysis of the data of this research which deals with An Appraisal of the Health Facilities and Program in the Cochran Colored Elementary and High School, Cochran, Georgia, 1959-1960.

The basic source of the data for this research was the forms of the State Department of Education's questionnaire: An Appraisal of the Health Facilities and Programs in Georgia Schools which were executed by the school administrator and other teaching personnel. The data called for on this questionnaire fall into major categories, to wit:

1. Organization and Administration of the Health Program
 - a. Responsibility for and personnel of
 - b. Evaluation
 - c. Procedure used in planning
 - d. In-service training of the personnel
2. The scope of the Health Program
 - a. Grounds
 - b. Buildings
 - c. Sanitation
 - d. Sanitation Facilities
 - e. Heating and Ventilation
 - f. Lighting
 - g. Classroom Arrangement and Cleanliness
 - h. Organization and Administration of the School
 - i. Personnel Relationship
 - j. Program Counselling
 - k. Community Environment
 - l. Safety
 - m. State Law Regarding Physical Education

n. Activities

3. The Lunchroom Program

- a. Standards of the Lunchroom
- b. Time Element
- c. Teacher Qualifications and Procedures
- d. General Information on Lunchroom, Personnel, Services and Certifications
- e. Pupil-Teacher Relationship
- f. Discipline and Individual Difference

The data were assembled into appropriate tables, and treated statistically with reference to the frequency and per cent of response to the respective items on the questionnaire and to the specific reactions indicated in conferences with school personnel.

Frame-of-Reference.--That part of the total health program which is specifically concerned with health education comes under the general heading of the health curriculum. It includes both instruction in health matters and the utilization of all experiences in the classroom, school, home and community which contribute to the child's understanding of the factors which influence his health and growth. The school administrator recognizes that education in health takes place through both channels and is a means to an end---healthful living---rather than an end in itself.

In the planning and coordination of the health curriculum, the administrator makes sure that it has enough flexibility to deal with situations and problems as they arise

in the lives of individual children or in a group, and enough stability to give it a definite place in the curriculum as a whole. The supervisory and teaching responsibility involved in carrying out the health curriculum varies in different schools. In some schools a health teacher or a health education supervisor may be appointed to develop the health curriculum and be responsible for its success. In others the full responsibility is carried by the classroom teachers, one or more of whom may be appointed by the administrator to integrate the health curriculum with the whole teaching program. These individuals may be key people in a "health council" or "health committee" of the school or school system.¹

In any case, the administrator is responsible for making teachers aware of the importance of health and the opportunities for teaching health in connection with the teaching of other subjects.

Personnel Responsible for and Committee Used in the Health Program.--The data on the personnel responsible for the Health Program, together with the committee used in the Health Program in the Cochran Colored School, Cochran, Georgia 1959-1960, are presented in Table 1, page 23.

¹
Health and Welfare Division Metropolitan Life Insurance Company. The School Health Program. n. d.

TABLE 1

DISTRIBUTION OF SELECTED FACTORS OF RESPONSIBILITIES FOR AND COMMITTEE USED IN THE
SCHOOL HEALTH PROGRAM OF THE COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
A. Is there a person directly responsible for the Administration and Promotion of the Health Program in your school?	X			1
B. Is there an active school health committee?	X			1
1. Are teachers members of this committee?	X			1
2. Are administrators?	X			1
3. Are pupils?	X			1
4. Are lay people?	X			1
5. Is a physician included?		X		1
6. Is a dentist included?		X		1
7. Is a nurse included?		X		1
8. Sanitation personnel?	X			1
9. Does this committee meet regularly?	X			1
10. Does it help plan, activate, and evaluate the health program in the school?	X			1
Total	9	3		12

The respondents were in agreement that the Health Program in the School partially met the criteria for a program such as: (A) A person directly responsible for the administration and promotion of the Health Program; (B) an active school health committee; (1) teachers members of the committee, (2) administrators members of the committee, (3) pupils members of the committee, (4) lay people members of the committee, (8) sanitation personnel, (9) the committee meets regularly, and (10) the school health committee helps plan, activate, and evaluate the health program; but the system does not have a medical staff such as (5) a doctor, (6) a dentist and (7) a health nurse.

Factors in the Evaluation of the Health Program.--The data on the factors in the evaluation of the health program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 2, page 25.

The responses to the questions of evaluation are as follows: The health knowledge test and the health aptitude test were rated fair. Interviews and conferences with pupils, parents, health personnel and other teachers were also rated fair. Training and encouraging pupils to evaluate themselves by keeping anecdotal records, diaries, etc. rated as fair.

Basic Training of the School Health Personnel.--The data on the Basic Training of the School Health Personnel found in

TABLE 2

DISTRIBUTION OF SELECTED FACTORS IN THE EVALUATION OF THE SCHOOL HEALTH PROGRAM
OF THE COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	None	Poor	Fair	Good	Excellent	Blank	Total
a. To what extent does the evaluation include:							
1. Health knowledge tests?				X			1
2. Health Attitude test?				X			1
3. Observing the attitudes and practices of pupils							
(a) In schools?				X			1
(b) In home, if possible?			X				1
(c) In community, where possible?			X				1
4. Interviews and conferences with pupils, parents health personnel and other teachers?				X			1
5. Training and encouraging pupils to evaluate themselves by keeping anecdotal records, diaries, etc.?				X			1
6. When the information is obtained, is it used to improve the health program?				X			1
Total		2		6			8

the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 3, page 27.

The response to the questionnaire indicated that all of the school health personnel have adequate training in the area including mental and social health as well as physical education. It also indicates that they did not have in-service training program in health.

Health personnel pre-and post-planning meetings are held monthly throughout the school year as an attempt to promote the health of the pupils.

Program Planning.--The data on the procedures used in the Health Program in the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 4, page 28.

The administrator reported that there is an operative program in Health Education that coincides with the Community Health Program.

The school utilizes the services of the school health personnel student representatives, representatives from the parent-teachers association and of laymen from the community.

The School-Community Environment.--The data on the selected factors of the School-Community Environment of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 5, page 29.

The school is suitable in size to meet the state standards. It appears that the school is making progress in its

TABLE 3

DISTRIBUTION OF SELECTED FACTORS IN THE BASIC TRAINING OF THE PERSONNEL AND
FACTORS OF THE TRAINING PROGRAM OF THE SCHOOL HEALTH PROGRAM OF THE
COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
C. Does the school personnel have training in the school Health Program.				
1. All?	X			1
2. More than half?				
3. Less than half?				
4. None?				
5. Does this training include mental and social health as well as physical health?	X			1
6. Do they feel that each has responsibilities in the school Health Program?	X			1
D. Is there an in-service training program in school personnel as part of total school program?		X		1
1. Study and planning during pre- and post-planning weeks?	X			1
Total	4	1		5

TABLE 4

DISTRIBUTION OF SELECTED FACTORS IN THE PROCEDURES USED IN PROGRAM PLANNING
OF THE SCHOOL HEALTH PROGRAM OF THE COCHRAN COLORED SCHOOL, COCHRAN,
GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
E. Is there a written program of health for your school?	X			1
1. Is this written program revised and improved at least annually?	X			1
2. Does the written program of health for your school conform to the county written program of school health?	X			1
3. Do school personnel and public health personnel jointly carry on the responsibility of the health program in schools?	X			1
4. In planning and writing the program of school health, did the following participate:				
a. School personnel, students and public health personnel?	X			1
b. P. T. A. etc.?	X			1
c. Community?	X			1
Total	7			7

TABLE 5

DISTRIBUTION OF SELECTED FACTORS ON THE SCHOOL COMMUNITY ENVIRONMENT SCHOOL
 GROUNDS IN THE SCHOOL HEALTH PROGRAM IN THE COCHRAN COLORED SCHOOL,
 COCHRAN, GEORGIA, 1959-1960

Factor	Poor	Fair	Good	Excellent	Blank	Total
A. Healthful School Community Environment		X				1
1. Grounds						
a. Suitable in size to meet State standards?						
b. Landscaped for:						
1. beautification			X			
2. drainage					X	2
c. Grass, flowers, and shrubbery in proper place well kept?		X				1
d. Are there objectionable commercial or industrial areas nearby creating excessive noise, dust, or other hazards?				X		1
e. Are grounds clean and well kept?			X			1
Total		2	2	1	1	6

efforts to landscape and beautify the grounds and keep them clean at all times. The play area is suitable for the pupils to attending the school. There is play supervision during the recess period. There aren't any commercial or industrial areas near the school.

Buildings.--The data on School Community-Environment (Building and Grounds) are found in Table 6, page 31.

The response to the questionnaire indicated that a new and attractive building had been provided; that the building is in good state of repair; that there are separate restrooms for the teachers where they may relax during free periods. The building is clean and well kept. There are also provisions made for the cripple.

Sanitation.--The school gets its water supply from the city. The water supply is adequate, safe, protected and approved by the local Health Department.

Drinking fountain facilities of the school are suitable and are located inside the building. The fountains are adjusted to the height and size of pupils (according to age and grade level using them).

Handwashing facilities are also provided for the school.

The toilet facilities of the school were reported to be adequate.

Heating and Ventilation.--The data on the Factors of the School-Community Environment (Heating and Ventilation) pre-

TABLE 6

DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY ENVIRONMENT
(BUILDINGS AND GROUNDS) IN THE SCHOOL HEALTH PROGRAM OF THE
COCHRAN COLORED SCHOOL OF COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
2. Buildings:				
a. Attractive and in good state of repair?	X			1
b. Adequate number of suitable classrooms? (Minimum 20 sq. ft. per pupil)	X			1
c. Adequate number of other buildings?	X			1
d. Is there a separate rest room for teachers where they may relax during free periods?	X			1
e. Are buildings clean and well kept?	X			1
f. Ramp entrance that will accommodate wheel chair?	X			1
3. Sanitation:				
a. Is drinking water available on grounds?	X			1
1. Is source of water approved by the Health Department?	X			1
2. Has it been tested by the Health Department within the year?	X			1
3. Is the quantity sufficient?	X			1
4. Is the distribution system approved by the Health Department?	X			1
b. Are adequate sanitary-type drinking fountains available with heights?	X			1
c. Are there always plenty of paper towels?	X			1
d. Is liquid soap or soap powder properly dispensed, used for handwashing?	X			1
e. Are toilets approved by the Department of Public Health?	X			1
(1) Flush type <u>X</u> Pit _____				
(2) Inside Building?	X			1
(3) Provided with adequate number of children using them?	X			1
(4) Kept clean?	X			1
(5) Free from marks?				
(6) Well ventilated?	X			1
(7) Well lighted?	X			1
(8) Supplied with plenty of toilet paper?	X			1
(9) Provided with fixtures suitable in height and size of pupils using them?	X			1
(10) Is disposal by septic tank?				
(11) Or city sewage system?	X			1
f. Are children trained in proper use and maintenance of toilet?	X			1
g. Is there a toilet that will accommodate a wheel chair patient?		X		1
Total	24	1		25

taining to the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 7, page 33.

The school has a central heating system. Each classroom has a thermometer which is properly located. The classrooms are well ventilated and free from drafts.

The adequate heating system, sufficient thermometers and well ventilated classrooms, without drafts, indicate an excellent opportunity for the maintenance of a healthful living program and situation in this school.

Lighting.--The data on the Factors of the School-Community Environment (Lighting) are found in Table 8, page 34.

The classrooms in the school have electric lights. The rooms are well lighted. Two-way roller shades are used at the windows. The desks are arranged for minimum glare and maximum light. The desks and other furniture are of natural wood finish. The walls are pale green, dull finish, do not produce a glare. The chalk boards are a medium green, along with other conditions, the teachers are promoters of health (they stand away from windows when teaching so that pupils will not have to face windows (light) when looking at them (teachers)).

Classroom Arrangement and Cleanliness.--The data on the classroom arrangement and cleanliness are presented in Table 9, page 35.

Some of the favorable factors in the classroom arrange-

TABLE 7

DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL COMMUNITY HEATING AND
VENTILATION IN THE SCHOOL HEALTH PROGRAM OF THE COCHRAN
COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
4. Heating and Ventilation				
a. Adequate central heating system?	X			1
b. Adequate jacketed stoves?			X	1
(1) Do stoves have fresh air inlet from outside?			X	1
c. Properly vented individual gas heaters?			X	1
d. Can an adequate portion of windows be open to provide sufficient ventilation?	X			1
e. Are the rooms free from drafts?	X			1
f. Is there an adequate supply of fresh air?	X			1
g. Is there an accurate thermometer in each classroom?	X			1
(1) Is it properly located?	X			1
Total	6		3	9

TABLE 8

DISTRIBUTION OF SELECTED FACTORS OF SCHOOL-COMMUNITY ENVIRONMENT
(LIGHTING) IN THE SCHOOL HEALTH PROGRAM OF THE COCHRAN
COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
Lighting				
h. Are there electric lights?	X			1
(1) Properly shielded?	X			1
(2) Do they give sufficient light to all parts of the room (at least 20 feet candles of artificial light)?	X			1
i. Are translucent window shades used?	X			1
(1) Are proper light controls used to shield the windows adequately, so arranged that light enters from upper part of windows? Check: diffusers _____ Venetian blinds _____ two-way roller shades <u>X</u>	X			1
j. Are desks arranged for minimum of glare and maximum of light? (Pupils should not face light or work in shadows created by their bodies)	X			1
(1) Are reading tables also thus placed?	X			1
(2) Are desks and furniture natural wood?	X			1
(3) Floors natural wood, or light green marbleized linoleum or asphalt tile free from glare?	X			1
k. Are walls and ceiling a light shade?	X			1
(1) Woodwork and trim same as walls, darkened to 50% reflection factor with non-glossy finish?	X			1
l. Do chalk boards have dull finish? (Should be green with a minimum of 20% light reflection).	X			1
(1) May be used without facing the light?	X			1
(2) Do teachers stand away from windows when teaching so pupils will not have to face light when looking at them?	X			1
Total	14	0	0	14

TABLE 9

DISTRIBUTION OF SELECTED FACTORS IN THE SCHOOL COMMUNITY ENVIRONMENT
CLASSROOM ARRANGEMENTS AND CLEANLINESS IN THE SCHOOL HEALTH
PROGRAM OF THE COCHRAN COLORED SCHOOL, COCHRAN,
GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
5. Classroom Arrangements and Cleanliness				
a. Is janitorial service provided?	X			1
1. Does he realize his importance in the general scheme for school sanitation and child welfare?	X			1
2. Has he had special training for his job through the State Department of Education custodial training program or elsewhere?	X			1
3. Does he have supervision?	X			1
b. Are there adequate equipment and supplies for cleaning?	X			1
c. Is room arrangement orderly and attractive?	X			1
d. Are there growing plants in the rooms?	X			1
e. Are there a few appropriate well placed pictures?	X			1
f. Is there a mirror placed at such a height that all pupils can use it?	X			1
g. Are screens on all windows?		X		1
h. Are desks and seats movable?	X			1
i. Are desks and seats suitable for age using them?	X			1
j. Are satisfactory facilities provided for wraps and other garments, either in classroom or halls?	X			1
k. Are floors finished for beauty and ease of cleaning?	X			1
Total	13	1		14

ments and the cleanliness of the classroom is that a well trained custodian is provided in the school. The custodian realizes his importance in the general scheme for school sanitation and child welfare. Adequate equipment and supplies are provided.

Classrooms.--The classrooms are cleaned and the desks are properly arranged. Growing plants are kept in the classrooms. The floors are finished for "beauty and ease of cleaning". There are mirrors (adjusted to the height of the children) provided in the classrooms. Satisfactory facilities are provided for wraps and other garments in the classrooms.

School Lunch Program.--The data on the School Lunch Program are presented in Table 10, page 37.

The school has a cafetorium (a room that is used both as a lunchroom and as an assembly room).

The lunchroom has adequate facilities. The school is receiving Federal Aid for the school Lunch Program. The lunchroom is certified by the Department of Public Health. All of the lunchroom personnel and student help must have physical examinations, training in sanitation, and proper methods of food handling.

All of the children are asked to take part in the school lunch program. Free lunches are given to children who need them. Pasteurized milk is served with their meals. The

TABLE 10

DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY ENVIRONMENT
(SCHOOL LUNCH PROGRAM) IN THE HEALTH PROGRAM OF THE COCHRAN
COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
6. School Lunch				
a. Does the school have adequate facilities for a school lunch program?	X			1
(1) Is the school refraining from selling soft drinks and package foods?	X			1
(2) Is the school lunch program receiving federal aid?	X			1
(3) Is the lunchroom inspected regularly by the Department of Public Health?	X			1
(4) Are physical examinations required for school lunch personnel and student help?	X			1
(5) Does school lunch personnel have training in sanitation and proper methods of food handling?	X			1
b. Do all children eat in lunchroom?		X		1
(1) Do all children eat lunch?		X		1
(2) Are all children provided a hot lunch	X			1
(3) Are 80% or more of the children participating in the lunchroom program?		X		1
(4) Is anything being done to increase the participation in the lunch program?	X			1
(5) Are the children who bring packed lunches given an opportunity to eat in the dining room?	X			1
(a) Taught to pack a good lunch?				
(6) Is pasteurized milk provided?	X			1
(7) Are free meals given to those who need them?	X			1
c. Is 20 minutes or more allowed for children to eat lunch exclusive of time consumed in washing hands, standing in line?	X			1
(1) Are all children encouraged to remain at the table until each child has had ample time to eat lunch?	X			1
(2) Are children allowed adequate time to wash hands before eating?				
(3) Do children return immediately to classroom from lunchroom?	X			1
d. Is there evidence that the school lunch program is bringing about positive learning experiences to pupils either directly or through classroom integration?	X			1
Total	15	3		18

goal of 80% or more participation in the lunchroom is not achieved.

The school lunch program has made provisions for a positive learning situation in the following ways: (1) pupils are taught to wash their hands before eating; (2) how to use properly flatware silver; to remain at the table until all in his group have finished eating; (4) to practice the common courtesies in the lunchroom as other areas of the school--community environment; and (5) not to indulge in play immediately after a meal.

Scheduling the School Day and Promotion Policies.--The data on the School Environment (scheduling the School Day and Policies) are presented in Table 11, page 39.

A. Scheduling.--In the school, welfare of the pupils is considered. The school program is planned so that the school day is long enough to give time for classroom activities that would be relaxing to the pupils. Rest periods are provided. Pupils are not over-burdened with home work and extra-class activities.

B. Promotion Policies.--In the Cochran Colored School pupils aren't retained unless they are the victims of excessive absenteeism; or if the pupils do not put forth serious efforts to learn.

The school is putting forth special efforts to show pupils and parents that it is ready to help in whatever

TABLE 11

DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY ENVIRONMENT
(SCHEDULING THE SCHOOL DAY AND PROMOTING POLICIES IN THE SCHOOL
HEALTH PROGRAM) OF THE COCHRAN COLORED SCHOOL, COCHRAN,
GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
7. Organization and Administration of the school				
(a) Is the school day long enough to prevent too much hurry?	X			1
(b) Is there enough time given for rest, relaxation, play?	X			1
(c) Are pupils burdened with home work and extra class activities?		X		1
(d) Are examinations, marks, reports to parents subjected to undue amount of fear of failure?	X			1
(e) Does the method of promotion take into consideration the total development of the pupil, rather than merely his knowledge of subject-matter?	X			1
Total	4	1		5

healthful way which is possible in developing the pupils to the fullest of their abilities.

Personal Relationship.--The data on the School-Community Environment (area of Personal Relationship) are presented in Table 12, page 41.

The responses to the questions on the relations between: (1) School and community; (2) school and homes; (3) principal and administrators, (4) principal and teachers and (5) teachers; were as follows: For both the school and community the relationship indicated was fair; the relationship of principal and administration and principal and teachers was indicated as excellent; and the relationship among the teachers was good. The data would appear to indicate that the patterns of relationship between school-community and home needed to be improved.

Program of Counseling.--The data on the Factors of School-Community Environment (Counseling) are presented in Table 13, page 42.

The area of counseling is adequate in the educational program of the Cochran Colored School with the exception of one item; there is not a Visiting Teacher available. However, the old method of teacher-pupil and parent-teacher relationships in the more urgent cases, has been helpful in making satisfactory adjustments in the area of behavior problems. The problems are those of school attendance,

TABLE 12

DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY ENVIRONMENT (AREA OF
PERSONAL RELATIONSHIPS IN THE SCHOOL HEALTH PROGRAM) OF THE COCHRAN
COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Poor	Fair	Good	Excellent	Blank	Total
7. F. Are the relations between:						
(1) School and community?		X				1
(2) School and home?		X				1
(3) Principal and administration?				X		1
(4) Principal and teachers?				X		1
(5) Teachers?			X			1
Total		2	1	2		5

TABLE 13

DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY ENVIRONMENT (PROGRAM
COUNSELING IN THE SCHOOL HEALTH PROGRAM) OF THE COCHRAN
COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
7. g. Is there a program of counseling?	X			1
(1) Is there a trained counselor?	X			1
(2) Is he trained in mental health?	X			1
h. Are services of visiting teachers available?		X		1
(1) Has this person had special training for the job?			X	1
(2) Are these services used to remove the causes for:				
(a) Non-attendance?	X			1
(b) Poor-attendance?	X			1
(c) Behavior problems?	X			1
Total	6	1	1	8

P.T.A. seminars, and school news releases, etc.

Community Environment.--The data on the Factors of the School-Community Environment in the School Health Program in the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 14, page 44.

A healthy community is a necessity in order to develop and maintain health habits that are desirable and livable.

The Cochran Colored School, realizing this principle, has met the following criteria by promoting and stimulating an interest in: (1) adequate safe water supply, flouridation of water; (2) proper water sewage disposal; (3) proper garbage disposal; (4) insect and rodent control; and (5) others needed public health protective measures.

Safety.--The data on the School-Community (Safety) of the School Health Program in the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 15, page 45.

The school buildings in the Cochran Colored School are one story buildings and have no need for stairs except to enter the rostrum. These are provided with hand rails and are lighted. There are treads on the stairways. It also indicated that the floors are in good repair.

Housekeeping and Maintenance.--The data on safety measures in Housekeeping, and Maintenance in the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table

TABLE 14

DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY ENVIRONMENT (COMMUNITY ENVIRONMENT IN THE HEALTH PROGRAM) IN THE COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
8. Community Environment				
(a) Does the school promote and stimulate interest in:				
(1) Adequate safe water supply?	X			1
(a) Fluoridation of water				
(2) Proper sewage disposal?	X			1
(3) Proper garbage disposal?	X			1
(4) Insect and rodent control?	X			1
(5) Other needed public health protective measures?	X			1
Total	5			5

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TABLE 15

DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY (SAFETY IN THE SCHOOL
HEALTH PROGRAM OF THE SCHOOL HEALTH PROGRAM) IN THE COCHRAN COLORED
SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
9. Safety				
a. Are stairways safe?	X			1
(1) Hand rails on all stairs in good repair?	X			1
(2) Safety treads on all steps?	X			1
(3) Bottom and top steps painted in contrast?	X			1
(4) Stairs and hand rails well lighted?	X			1
b. Are corridors safe?	X			1
(1) No projection?	X			1
(2) No loose plaster?	X			1
(3) Floor boards in good repair?	X			1
Total	9			9

16, page 47.

The responses to the questions on safety were as follows: the floor boards are in good repair; non-skid wax is used on all floors; all doors open outward; all combustible and inflammable materials are stored in fireproof containers; and there are regular inspections of electrical and heating equipment.

Safety on Playgrounds.--The data on the construction of play grounds, upkeep and equipment in the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 17, page 48.

The Cochran Colored School has met the following health and safety criteria: (1) that playground construction meet the standards; (2) play equipment is kept in good repair; (3) that hazardous materials are kept off playgrounds; (4) a person trained in First-Aid supervises play periods; (5) that there is a school patrol; (6) that school buses meet Department of Public Safety Standards; and (7) that drivers have training in driver education.

Health Services.--The data on Health Services rendered by the County Department of Health in the school of Cochran, Georgia, 1959-1960, are presented in Table 18, page 49.

The response to the questionnaire indicated that the following services from the County Department of Health were given: (1) Health Officer; (2) Nurse; and Sanitarian.

TABLE 16

DISTRIBUTION OF SELECTED FACTORS ON SAFETY MEASURES IN HOUSEKEEPING AND MAINTENANCE
IN THE COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
Safety:				
9. c. Is non-skid wax used on floors?	X			1
d. Do all doors open outward?	X			
e. Are all combustible and inflammable materials stored in fireproof containers (grease rags, mops)?	X			1
f. Is the heating unit checked regularly for unvented gases and fire hazards?	X			1
g. Is the electrical circuit checked regularly for overloading and other hazards?	X			1
h. Does the fire protection equipment meet community fire regulations?	X			1
(1) Are they inspected regularly by the Fire Department?	X			1
Total	7			7

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TABLE 17

DISTRIBUTION OF SELECTED FACTORS ON SAFETY ON PLAYGROUND CONSTRUCTION,
EQUIPMENT AND UPKEEP IN THE SCHOOL HEALTH PROGRAM OF THE COCHRAN
COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor		Yes	No	Blank	Total
Playground Safety					
9. i.	Does playground construction meet safety standards?	X			1
j.	Play equipment kept in good repair?	X			1
k.	Are hazardous materials such as nails, broken glass, stones, etc., kept off playgrounds?	X			1
l.	Is there a teacher trained in First-Aid designated as supervisor of all play periods?	X			1
m.	Is there a school patrol?	X			1
n.	Do all school buses meet Department of Public Safety standards?	X			1
	(1) Drivers have training in Driver Education?	X			1
o.	Have bicycle safety program?	X			1
p.	Fire escapes meet state requirements?	X			1
Total		9			9

TABLE 18

DISTRIBUTION OF SELECTED FACTORS ON THE HEALTH SERVICES OF THE DEPARTMENT
OF PUBLIC HEALTH IN THE SCHOOL HEALTH PROGRAM OF THE COCHRAN COLORED
SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
B. Health Services				
Is there a Department of Public Health in your county?	X			1
(a) Does it have:				
(1) Health Officer?	X			1
(2) Nurse?	X			1
(3) Engineer of Sanitation?	X			1
(4) Dental Hygienist?	X			1
(5) Dental Clinic?			X	1
Total	5		1	6

There is no Dental Health Service in the program.

Health Services (Continued).--The data on the relationship between the Cochran Colored School and the local Health Department are presented in Table 19, page 51.

The school personnel and the Health Department work well together. The nurse makes frequent visits. The teachers and the nurse will quite often meet after there is an examination of some pupil. The method of immunization standards are in line with those recommended by the State Department of Public Health. Records are kept of the visits and observation of children.

Health Services (Continued).--The data on the Reports of Health Personnel of the Department of Public Health in the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 20, page 52.

The program of health personnel is adequate. The health officer visits the school once every month. Each teacher is expected to have a physical examination including chest x-ray before entering school. The employees earn sick leave. There are quite a number of pre-school children who have their minor defects corrected before entering school.

First-Aid.--The data on the Service Rendered and type of Equipment for First-Aid in the School Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 21, page 53.

TABLE 19

DISTRIBUTION OF SELECTED FACTORS OF THE HEALTH SERVICES AVAILABLE IN THE
SCHOOL HEALTH PROGRAM OF THE COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA,
1959-1960

Factor	Yes	No	Blank	Total
Health Services				
9B. 2. Does a close working relationship exist between your school and the local health department?	X			1
3. Do local officials and voluntary agencies participate in the school health program?	X			1
4. Do teachers and public health nurse participate in teacher-nurse conferences when public health nurse visits the school?	X			1
5. Do teachers do periodic teacher observation of children?	X			1
(a) Do teachers keep up to date notes of "teacher observations" and transfer them with other records?	X			1
(b) Are your immunization standards in line with those recommended by State Department of Public Health?	X			1
Total	6			6

TABLE 20

DISTRIBUTION OF SELECTED FACTORS ON THE REPORTS OF HEALTH PERSONNEL OF THE
DEPARTMENT OF PUBLIC HEALTH IN THE COCHRAN COLORED SCHOOL, COCHRAN,
GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
Health Services				
9B. 6. Does the school receive reports of the visits of health officers?	X			1
(a) Reports of visits of other public health personnel?	X			1
7. Is a health examination, including chest x-ray, required of all school personnel before employment?	X			1
(a) If not, which ones?			X	1
(b) Periodically every two years thereafter?	X			1
8. Is there a program for health of school employees?	X			1
(a) Do employees earn sick leave?	X			1
(b) Is provisions made from employee health insurance?	X			1
9. Are pre-school children examined and remediable defects corrected before entering school?			X	1
Total	7		2	9

TABLE 21

DISTRIBUTION OF SELECTED FACTORS OF THE SERVICES RENDERED AND TYPE OF
EQUIPMENT FOR FIRST AID IN THE SCHOOL HEALTH PROGRAM OF THE COCHRAN
COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
10. First-Aid				
a. Is there a health suite?	X			1
(1) Does it contain a special room for the care of the sick?	X			1
(2) Does this suite meet the standards of the Building Code?	X			1
b. Is there a First-aid cabinet?	X			1
(1) Is this cabinet easily accessible in time of accident?	X			1
(2) Do you check contents weekly and refill if needed?	X			1
(3) Is someone trained in First-Aid designated to be called for all serious accidents?	X			1
c. Are all the teachers trained in First-Aid?	X			1
11. Plan for Sick Children				
a. Do you isolate sick children?	X			1
b. Do you have plans for transportation?	X			1
(1) Home?				
(2) Hospitals?				
(3) Doctor?				
Total	10			10

The program of First-Aid has met the following criteria: (1) the equipment is good; (2) there is a clinic-room; (3) a cabinet is placed where it can be easily reached when needed; and (4) transportation is provided by the principal, if there arises a need for a sick pupil to go home or to the doctor.

Civil Defense Program.--The data on the Civil Defense program in the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 22, page 55.

The Civil Defense Program in the Cochran Colored School, is in accord with the state program. It has taught the children what to do when disaster strikes. However, children are not required to wear identification tags.

Physical Education.--The data on Physical Education and Recreation in the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 23, page 56.

The answer to the questionnaire states that there is a good physical education program in the school. It serves in accordance with the State Program. The teacher who is trained in physical education on the high school level works with the elementary group. Physical education is coordinated with the total health program.

Activities of the Physical Education Program.--The data

TABLE 22
DISTRIBUTION OF SELECTED FACTORS OF THE CIVIL DEFENSE PROGRAM IN THE SCHOOL
HEALTH PROGRAM OF THE COCHRAN COLORED SCHOOL, COCHRAN
GEORGIA, 1959-1960

Factor		Yes	No	Blank	Total
Civil Defense					
12.	a. Does your school have active civil defense?	X			1
	b. Is the school program of civil defense in accord with State activities?	X			1
	c. Does every child wear an identification tag?		X		1
	d. Has every child received instructions as to when disaster hits?	X			1
	e. Has every child received instructions as to what to do and what precautions should be observed when disaster strikes?	X			1
Total					
		4	1		5

TABLE 23

DISTRIBUTION OF SELECTED FACTORS OF THE PHYSICAL EDUCATION AND RECREATION
PROGRAM IN THE SCHOOL HEALTH PROGRAM IN THE COCHRAN COLORED SCHOOL,
COCHRAN, GEORGIA, 1959-1960.

Factor		Yes	No	Blank	Total
Physical Education and Recreation					
12.	c.				
	1.				
	2.				
	(a)				
	(b)				
	(c)				
	(d)				
	(e)				
Total					

56

on the activities of the Physical Education in the School Health Program of the Cochran Colored School, Cochran, Georgia 1959-1960, are presented in Table 24, page 58.

The responses pertaining to the criteria on the Activities of the instructional program indicated the following levels of satisfactoriness: seven of the items dealing with aspects of the comprehensiveness of the instructional program and the activities pertaining thereto checked fair; three of the items dealing with intramural sports and games were checked excellent; and one item dealing with stunts and self-testing activities was checked good.

The program was also characterized by the following criteria: (a) a comprehensive instructional program planned progressively to promote the learning of the fundamentals of running, jumping, throwing, striking, dodging, falling and catching; (b) time allotment, a daily period of at least thirty minutes once a week.

The questionnaire indicated an optimum level of meeting the standards on this area of the Health Program of the Cochran Colored School.

Integration and Schedule for Health Instruction.--The data on the Integration of the Health Instruction, together with a schedule for the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Tables 25 and 26, page 59.

TABLE 24

DISTRIBUTION OF SELECTED FACTORS OF THE INSTRUCTIONAL PROGRAM (AND ACTIVITIES)
OF THE PHYSICAL EDUCATION AND RECREATION PROGRAM OF THE SCHOOL HEALTH PROGRAM
OF THE COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	None	Poor	Fair	Good	Excellent	Blank	Total
12. f. Is this a comprehensive instructional program planned progressively to promote:							
(1) The learning of motor skills?			X				1
(2) The providing of sufficient physical activities for normal growth and development?			X				1
(3) The teaching of arts and crafts for recreational purposes?			X				1
g. Does the program provide activities including:							
(1) Games, utilizing the fundamental activities of running, jumping, throwing, striking, dodging, falling and catching?			X				1
(2) Rhythmic activities suited to the age of the children?			X				1
(3) Stunts and self-testing activities?				X			1
(4) Activities requiring self-expression, self-disciplin and team work?			X				1
(5) Modified activities suited to the abilities of the physically handicapped?			X				1
(6) Intramural competition in sports and games adapted to age levels (no inter-scholastic contests for children of those ages)?					X		1
(7) Music (singing, piano, etc.)?					X		1
(8) Dramatics, hobbies, etc.?					X		1
Total			7	1	3		11

TABLES 25 & 26

DISTRIBUTION OF SELECTED FACTORS OF INTEGRATION AND SCHEDULE OF HEALTH INSTRUCTION
AND OTHER SUBJECTS IN THE SCHOOL HEALTH PROGRAM IN THE COCHRAN COLORED SCHOOL
COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
D. Health Instruction				
Is health instruction integrated into the teaching of all subjects in:				
a. Elementary School?	X			1
(1) Check subjects:				
Reading	X			1
Science	X			1
Social Studies	X			1
Art	X			1
Music	X			1
Physical Education	X			1
Arithmetic	X			1
E. Is a definite period set aside for health instruction in:				
a. Elementary School (7-8 grades)?	X			1
Total	9			9

The responses to the questionnaire items in this area indicated that Health Instruction is integrated with the other subjects; social studies, reading, arithmetic, physical education, arts, music and science. A period of thirty minutes per day is given to health instruction.

Supplementary Materials.--The data on the provision of supplementary materials in the School Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 27, page 61.

In the school there is the usual array of supplementary aids for the teaching of health such as: Films, Charts, Posters, Exhibits, Reference Books, Pamphlets, Magazines, Models, and health department materials. Most of these materials are processed through or housed in the library.

Activities Carried on in the School Health Program.--The data on the activities carried on in the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 28, page 62.

The responses to the questionnaire items indicated that out of the 36 types of activities in the health program, 27 fell in the following categories: (1) Trips to dairies, (2) Market, (3) Bakery, (4) Waterworks, (5) Grocery Store, (6) Fire department, (7) Health Department, (8) Special Lectures, (9) Assembly programs on health, (10) Medical examinations, (11) Immunizations, (12) Testing Hearing, (13) Testing Vis-

TABLE 27

DISTRIBUTION OF SELECTED FACTORS OF SUPPLEMENTARY MATERIALS USED IN THE SCHOOL
HEALTH PROGRAM OF THE COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
D. Supplementary Materials:				
1. Films	X			1
2. Charts	X			1
3. Posters	X			1
4. Exhibits	X			1
5. Reference Books	X			1
6. Pamphlets	X			1
7. Magazines	X			1
8. Models	X			1
9. Materials available from local health department?		X		1
(a) Is there adequate health materials available in the school library?	X			1
(1) References for teachers?	X			1
(2) References for pupils?	X			1
Total	11	1		12

TABLE 28

DISTRIBUTION OF SELECTED FACTORS OF ACTIVITIES CARRIED ON IN THE SCHOOL HEALTH PROGRAM IN THE COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
D. Is any health teaching done through such activities as?				
a. Trips to dairies	X			1
b. Market	X			1
c. Bakery	X			1
d. Water Works	X			1
e. Grocery store	X			1
f. Fire Department	X			1
g. Health Department	X			1
h. Hospital		X		1
i. Special lectures	X			1
j. Radio Programs (received at school)		X		1
k. Assembly programs on health	X			1
l. Helping in community clean-up campaigns		X		1
m. Medical examinations	X			1
n. Immunizations	X			1
o. Weighing and measuring children		X		1
p. Dental examination		X		1
q. Testing hearing	X			1
r. Testing vision			X	1
s. Using cumulative health records	X			1
t. School lunchroom program	X			1
u. Teaching high school pupils how to drive a car			X	1
v. Morning inspection	X			1
w. Safety on school bus	X			1
x. Safety at school	X			1
y. Safety in the community	X			1
z. Safety in the home			X	1
z1. Fire drills	X			1
z2. Use of fire extinguishers	X			1
z3. Laboratory experiments	X			1
z4. Making a study of what children are eating	X			1
z5. Nutritional experiments with rats	X			1
z6. Having children assume responsibility for regulating heating and ventilation to maintain temperatures 68 to 70 degrees	X			1
z7. Having pupils adjust curtains and lights for best lighting effects	X			1
z8. Play activities of children	X			1
z9. Having children help keep grounds and buildings clean and attractive			X	1
z10. Planting of vegetable gardens:				
a. At home	X			1
b. At school	X			1
Total	27	5	4	36

ion, (14) Using Cumulative health records, (15) School lunch-room program, (16) Morning inspection, (17) Safety on school bus, (18) Safety at school, (19) Safety in the community, (20) Fire drills, (21) Use of fire extinguishers, (22) Laboratory experiments, (23) Making a study of what children are eating, (24) Nutritional experiments with white rats, (25) Having children assume responsibility for regulating heating and ventilation to maintain temperatures 68 to 70 degrees, (26) Having pupils adjust curtains and lights for best lighting effects, (27) Play activities of children, Planting a vegetable garden (a) at home, (b) at school.

On the other hand 5 of such activities not in the program were: (1) Hospital, (2) Radio program, (3) Clean-up campaigns, (4) Weighing and measuring children, (5) Dental examination.

Further, 4 activities and facilities not reacted to were: (1) Testing vision, (2) Teaching high school pupils how to drive a car, (3) Safety in the home, (4) Having children help keep grounds and building clean and attractive.

Health Habits.--The data on Health Habits in the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 29 page 65.

The school reported that they had an excellent program in personal health habits. The pupils were able to select

adequate and balanced diets, eating regularly and properly, visiting the dentist twice yearly, keeping themselves clean and well groomed.

Healthful Practices.--The data on Healthful Practices in the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 30, page 66.

The Cochran Colored School had a very good program in Healthful Practices as indicated by such data as: (1) that the child should remain at home when he has a communicable disease; (2) maintaining sanitary conditions at home and school; (3) selecting clothes suitable for weather conditions (4) working together cooperatively and being kind and thoughtful; and (5) seeking scientific medical advice when ill rather than treating self with patent medicines.

Special Education.--The data on the Special Education program of the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 31, page 67.

There is no provision made for Special Education in the Health Program at the Cochran Colored School. However, the questionnaire response indicated that there is a need for Exceptional Children.

Lunch Room.--The data on the Lunch Room in the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 32, page 69.

TABLE 29

DISTRIBUTION OF SELECTED FACTORS OF HEALTH HABITS IN THE SCHOOL HEALTH
PROGRAM OF THE COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Factor	Yes	No	Blank	Total
Health Habits				
9. Is emphasis of health teaching directed to the formation of intelligent behavior and proper attitudes rather than knowledge for knowledge's sake and evidenced by pupils:				
(a) Selecting adequate and balanced diet when choosing at school and elsewhere?	X			1
(b) Eating regularly and properly?	X			1
(c) Visiting the dentist twice a year and at other times when needed?	X			1
(d) Drinking plenty of water daily?	X			1
(e) Brushing teeth properly before breakfast and after each meal?	X			1
(f) Keeping their person clean and well groomed?	X			1
(g) Practicing proper toilet habits?	X			1
(h) Washing and drying hands with proper towels before meals?	X			1
(i) Playing outdoors except during inclement weather?	X			1
(j) Working, resting and relaxing at proper periods and getting proper amount of sleep?	X			1
(k) Practicing good posture habits?	X			1
(l) Taking proper care of eyes?	X			1
Total	12			12

TABLE 30

DISTRIBUTION OF SELECTED FACTORS OF HEALTHFUL PRACTICES IN THE HEALTH PROGRAM
OF THE COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959- 1960

Factor	Yes	No	Blank	Total
Healthful Practices				
m. Remaining at home when attacks with colds or other communicable diseases?	X			1
n. Helping to keep building properly adjusted to needs of pupils?	X			1
o. Helping to keep seats properly adjusted to needs of pupils?	X			1
p. Observing proper safety rules at school?	X			1
1. On streets?	X			1
2. On highways?	X			1
3. In home?	X			1
q. Participating in monthly fire drills?	X			1
r. Showing interest in their growth and reasons for it?	X			1
s. Working together cooperatively and being kind and thoughtful?	X			1
t. Having knowledge of and wearing and caring for proper clothing?	X			1
u. Knowing how and properly caring for sick in the home?	X			1
v. Knowing how and administering first aid properly?	X			1
w. Selecting scientific medical advice when ill rather than treating self with patent medicine or following advice of unqualified persons?	X			1
x. Influencing in home:				
1. Screening?	X			1
2. Better health habits of other members of family?	X			1
3. Improving water supply?	X			1
4. Helping to make homes more attractive?	X			1
Total	17			17

TABLE 31

Factor	Yes	No	Blank	Total
E. Special Education				
1. Does the school provide a program for exceptional children (Mentally gifted, mentally retarded, with physical defects, emotionally disturbed or socially maladjusted)?	X			1
2. Is this program approved by State Department of Education?				
a. Which programs are needed?				
Mentally retarded				
All				
No response				
Total	1			1

The responses to the questionnaire indicated, that the members of the school lunchroom personnel were holders of health certificates, that menus were made by persons trained in nutrition. The data also indicated that the school did not sell soft drinks and package foods.

Teacher Traits.--The data on Teacher Traits in the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 33, page 70.

Most of the teachers possessed the traits desired in teachers that promote favorable learning situations such as: neat, clean appearances, helpful, calm, unruffled, patient and soothing voices, helps in a kind but business like way, decidedly clear in direction, enjoys fun with class, gratefully receives criticisms, children seem unrestrained and activities are varied according to groups and individuals needs and interests.

The desirable traits of teacher excellence ranged from a low of 1 or 7 per cent for: shrill voice (or loud voice), sarcastic, nervous critical and curt, ignores children's complaints, resents criticisms, and all pupils in the same grade are doing the same thing; to a high of 13 or 93 per cent for: teacher has a neat, clean appearance, helpful, calm, unruffled, patient and soothing, helps in a calm but business like way, decidedly clear in direction and activities are teacher directed.

TABLE 32

DISTRIBUTION OF GENERAL INFORMATION PERTAINING TO THE PERSONNEL AND SERVICES
OF THE LUNCHROOM PROGRAM OF THE COCHRAN COLORED SCHOOL, COCHRAN,
GEORGIA, 1959-1960

Services / Certificates	Yes	No	Blank	Total
1. Only persons holding health certificates handle the lunchroom food	X			1
2. Menus are made by a trained person in nutrition	X			1
3. Menus are made by a person who has had no training in nutrition		X		1
4. Sell soft drinks		X		1
5. Sell ice cream		X		1
6. Sell candy		X		1
Total	2	4		6

TABLE 33

DISTRIBUTION OF THE TRAITS OF TEACHER EXCELLENCE AND
METHODOLOGY OBSERVED IN THE CLASS AND EXTRA-CLASS
SITUATIONS AS MANIFESTED BY THE TEACHERS IN
THE COCHRAN COLORED SCHOOL, COCHRAN,
GEORGIA, 1959-1960

Traits	Number Per Cent	
1. Teacher has a neat, clean appearance	13	93
2. Alert, Cheerful, and enthusiastic	11	79
3. Pleasing facial expression	10	71
4. Well modulated voice	11	79
5. Shrill voice (or loud voice)	1	7
6. Uses gestures and facial expressions to call attention to pupils shortcomings	0	0
7. Helpful, calm, unruffled, patient and soothing	13	93
8. Sarcastic, nervous, critical and curt	1	7
9. Helps in a calm, but business like way	13	93
10. Gets order by promising punishment	3	21
11. Ignores children's complaints	1	7
12. Decidedly clear in directions	13	93
13. Enjoys fun with class (sense of humor)	12	84
14. Comments on efforts	7	50
15. Calls attention to mistakes kindly	11	78
16. Resentful of interruptions	2	14
17. Gratefully receives criticisms	12	84
18. Resents criticisms	1	7
19. Activities are teacher directed	13	93
20. Children seem unrestrained	7	50
21. All pupils in the same grade are doing the same thing	1	7
22. Activities are varied according to groups and individual needs and interests	14	100

The remaining ranking traits of excellence were: 12 or 84 per cent for: enjoys fun with class (sense of humor) and gratefully receives criticisms; 11 or 79 per cent for: alert, cheerful, and enthusiastic, well modulated voice, and calls attention to mistakes kindly; 10 or 71 per cent for pleasing in facial expression.

Under such "climate" it would seem that pupils should be able to develop to their highest abilities.

Teacher Training.--The data on Teacher Training in the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 34, page 72.

The area of preparation related to health education for these teachers ranked as follows: Child Development 8 or 57 per cent; Health Education in Elementary Schools and Child Behavior 6 or 42 per cent; Community Hygiene 5 or 35 per cent; and Mental Hygiene 4 or 29 per cent.

The training of the teachers in Health Education is such that would promote desirable habits, attitudes and skills as well as general knowledge of the boys and girls.

Teachers Philosophy of Discipline.--The data on Teachers Philosophy of Discipline in the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 35 page 73.

The data shows that the teachers philosophy of discipline were as follows: from a low of 7 per cent for the child

TABLE 34

DISTRIBUTION OF THE AREAS OF PREPARATION RELATED TO HEALTH
EDUCATION WHICH WERE PURSUED BY THE TEACHERS IN THE
COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Type of Training	Number Per Cent	
Health Education		
1. Health Education in Elementary Schools	6	42
2. Community Hygiene	5	35
3. Child Development	8	57
4. Mental Hygiene	4	29
5. Child Behavior	6	42
6. Others:		
a. First-Aid		
b. Psychology		
(1) Child		

TABLE 35

DISTRIBUTION OF THE PHILOSOPHIES AND/OR CRITERIA PERTAINING
TO PUPIL TEACHER RELATIONSHIP OPERATIVE IN THE COCHRAN
COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Philosophy / Criteria	Number	Per Cent
1. Teachers Philosophy of Discipline		
a. The child is viewed as an organism responding to the world according to his powers and capacities, hence the child is an individual to be developed.	11	78
b. The teacher must put forth effort to correct what are regarded as inborn traits or inherent urges to misconduct, hence the child is an individual to be corrected.	2	14
2. Formulating Standards		
a. The child helps formulate standards	10	71
b. The teacher formulates standards for the child	2	14
3. Judging Standards		
a. The child is the judge of standards	1	7
b. The teacher formulates standards for the child	9	64

is the judge of standards; to a high of 11 or 78 per cent for the child is viewed as an organism responding to the world according to his powers and capacities, hence the child is an individual to be developed.

The remaining philosophy of criteria were 10 or 71 per cent for the child helps formulate standards; 9 or 64 per cent the teacher formulates standards for the child; 2 or 14 per cent for the teacher must put forth effort to correct what would be regarded as inborn traits or inherent urges to misconduct, hence the child is an individual to be corrected; the teacher formulates standards for the child.

The teachers philosophy of discipline is very favorable, the pupils should have been able to participate in activities with desirable freedom in physical, mental, emotional health and other safety measures at school.

Disciplinary Controls.--The data on the Principles pertaining to Disciplinary Controls and Punishment found to be operated in the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 36, page 75.

The data shows that the disciplinary controls were as follows: the child is guided by development of a willfulness to accept responsibility for an act, 7 or 50 per cent; 4 types of punishment were listed.

The remaining disciplinary and punishment controls were: 5 or 35 per cent for the child is guided by social approval

TABLE 36

DISTRIBUTION OF THE PRINCIPLES PERTAINING TO DISCIPLINARY
CONTROL AND PUNISHMENT AS FOUND OPERATIVE IN THE COCHRAN
COLORED SCHOOL, COCHRAN, GEORGIA, 1959-1960

Controls / Punishment	Number	Per Cent
1. Disciplinary Controls		
a. The child is guided by social approval and disapproval	5	35
b. The child is guided by an idea	1	7
c. The child is guided by fear		
d. The child is guided by development of a willingness to accept responsibility for an act	7	50
2. Punishment		
a. Corporal Punishment	1	7
b. Make the child stand for a long time	1	7
c. Avoid using recreational or recess periods		
d. Deprive the child of recreational or recess periods	1	7
e. Use none of these	7	50

and disapproval; 1 or 7 per cent for the child is guided by an idea; corporal punishment; make the child stand for a long time; deprive the child of recreational or recess periods.

Individual Differences.--The data on Individual Differences in the Health Program of the Cochran Colored School, Cochran, Georgia, 1959-1960, are presented in Table 37, page 77.

Distribution of individual differences were as follows: Are promotions granted on knowledge of subject matter? Percentage of yes answers 71 per cent; percentage of no answers 7 per cent. Are report cards and grades emphasized? Percentage of yes 64; percentage of no 14; Are pupils given a chance to excell in some one thing at the same time? Yes percentage 57, no percentage 35; Is the same lesson plan used for all pupils? Yes percentage 35, no percentage 50; and are special provisions made for handicapped children? Yes percentage 14, no percentage 50.

TABLE 37

DISTRIBUTION OF PRINCIPLES PERTAINING TO STRUCTURAL
DIFFERENCES AND FATIGUE AS FOUND OPERATIVE IN THE
COCHRAN COLORED SCHOOL, COCHRAN, GEORGIA
1959-1960

Differences / Fatigue			Per Cent	
	Yes	No	Yes	No
1. Individual Differences				
a. Is the same lesson plan used for all pupils?	5	7	35	50
b. Are pupils given a chance to excel in some one thing at same time?	8	5	57	35
c. Are promotions granted on knowledge of subject-matter?	10	1	71	7
d. Are reports, cards and grades emphasized?	9	2	64	14
e. Are special provisions made for handicapped children?	2	7	14	50
Total	34	22	241	156

CHAPTER III

SUMMARY AND CONCLUSIONS

Introductory Statement.--The primary purpose of this study was concerned with developing an appraisal of the health facilities and program at Cochran Colored School, Cochran, Georgia, 1959-1960 as a basis for suggestive changes in the administrative procedures of the school so as to meet more fully the needs of the pupils.

The study was related primarily to the educational features of such items as construction standards, building maintenance, location and over-all facilities rather than to a detailed account of the standards and techniques commonly known to architects.

Rationale.--We have a knowledge of the developmental needs of the children which indicates that health teaching in the schools will center around the formation and extension of desirable practices, attitudes and understanding associated with growth, food, rest, sleep, cleanliness, activity, elimination, fresh air and sunshine and several others that are important in the well being of all children.

Health is important to all children, for it is the foundation upon which they must depend to a large extent for achievement, success, and happiness in life. The truly healthy child is not only free from the drains of physical defects, disease, fears, and irrational behavior, but he

looks healthy. The health of the individual affects everything he does; and everything he does from birth to death influences his health.

The child with good health seems to be better adjusted socially, and he is able to do better work in school than the child whose health is poor. The child who has good health is the one who has an abundance of energy and whose body organs are functioning efficiently.

Children should be able to attend schools with healthy environments. The total environmental situations are of tremendous importance for achieving favorable habits. It will serve as an example of a healthful environment which will carry over into the home and community and result in better health facilities in the entire community including the school.

In planning for a healthful school environment all of these things play an important part:

The heating and ventilation, the temperature, humidity, movement and cleanliness of the air should be maintained at desirable standards. Emphasis should be placed on the cleanliness of classrooms, toilets, and playgrounds.

Facilities should be available for pupils to wash their hands with soap and clean water before eating and after using the toilets.

The source of the school water supply and the methods of

distributing the water to the persons who drink it should be carefully protected in order to protect pupils and teachers from water-borne disease.

The school should strive to provide school children with well balanced lunches of high nutritive value, carefully and wholesomely prepared under sanitary conditions.

Safety against fires and other accidents should be provided. Further consideration should be given to classroom desks, and seats, classroom lighting and accoustics, rest quarter, and facilities for activity and play would also be considered.

Provisions for healthful school living might also include attention to the total school program not only in relation to physical health but also in the effects of the total curriculum on total health. Moreover, attention should also be given to ever changing teacher-pupil relationships, particularly in the aspect which is called "mental hygiene of the classroom".

No matter who the child is or what he does, good health is his greatest asset; with it he can accomplish much, but without it he will have difficulty in fulfilling his ambition.

The general school program with its class arrangement, time schedules and rest or recreation periods should be given consideration to health requirements. Adequate playgrounds

and play equipment are essential and should include recreational and athletic facilities. The school plant may meet all the requirements of comfort and sanitation and yet be so operated as to lack many of the essentials.

Evolution of the Problem.--The desire to do a study in this problem area grew out of: a need to investigate the health problem of the Cochran Colored Elementary and High School, Cochran, Georgia, and to identify the present health practices; it also evolved out of the belief that improvements could be made where necessary in the light of present-day accepted practices.

Contribution to Educational Theory and Practice.--This study reveals important information concerning the current health practices in Cochran Colored Elementary and High School, Cochran, Georgia, and points out more fruitful approaches to the needs, the modifications and improvements of the health program. It should bring to light information concerning the unparalleled importance of health in our daily lives.

More specifically, the probable contributions and educational theory and practice of this study are identified below:

1. Stimulating the school living needs for which the school might take the responsibility.
2. Stimulating the school to a fuller evaluation of its facilities and program of healthful school

living practices.

3. Determining the present practices of the healthful living aspects of the school health education of Cochran Colored Elementary and High School.
4. To provide the basis for a comprehensive appraisal and evaluation of the health facilities, instruction, and services of the Cochran Colored Elementary and High School, Cochran, Georgia.

Statement of the Problem.--The problem of this study was concerned with developing an appraisal of the health facilities and program found in operation in the Cochran Colored Elementary and High School, Cochran, Georgia, 1959-1960, with emphasis on building construction, maintenance, location and overall facilities.

Limitation of the Study.--This study was confined to an appraisal but was not basically concerned with a measurement of the effectiveness of the health facilities and program in the Cochran Colored Elementary and High School, Cochran Georgia.

Purposes of the Study.--The primary purpose of this study was to determine the status of the facilities and program for healthful school environment in the Cochran Colored Elementary and High School Cochran, Georgia. The specific purposes of the study are characterized as follows:

1. To determine the present facilities for healthful school living aspects in the Cochran Colored Elementary and High School, Cochran, Georgia.
2. To determine the nature of selected aspects of the program for healthful living in the Cochran Colored

Elementary and High School, Cochran, Georgia,
1959-1960.

3. To determine the extent to which the health education program in the Cochran Colored Elementary and High School is meeting the needs of the school in promoting growth and development of children and youth.
4. To determine the unmet healthful school living needs, if any, for which the administration and staff may assume cooperative responsibility.
5. To stimulate the school staff and pupil personnel to a more diligent awareness of the desirable facilities and program of healthful school living practice in the Cochran Colored Elementary and High School.
6. To formulate whatever implications, if any, for educational theory and practice as may be derived from the data.

Definition of Terms.--The terms which were used throughout this research are defined as follows:

1. The term, "Health", as used in this study refers to that quality of life that renders the individual fit to live most and serve best. Health in this research is also used to mean that subject in the classroom which deals with instructing one how to care for his body to attain physical fitness.¹
2. The term, "Healthful School Living", as used in this study, designates the provision of a safe and healthful school day, and the establishment of interpersonal relationships favorable to the best emotional, social, and physical health of pupils.²

¹ American Association of School Administrators, Health in School, (D. C.; National Association, 1944), p. 2.

² Irwin Johnson, Methods and Materials in School, Health Education (St. Louis: C. V. Mosby Company, 1956), p. 21.

3. The term, "School Health Program", as used in this study, refers to the school procedures that contribute to the understanding, maintenance, and improvement of the health education and healthful school living.¹

Locale and Research-Design of Study.--Patterns of the research design of this study are characterized in the separately captioned statements immediately to follow below:

1. Locale.--The locale of this study was the Cochran Elementary and High School, Cochran, Georgia, on U. S. Highway 129, approximately 40 miles Southeast of Macon, Georgia. It is a predominantly agrarian county, the chief products being livestock, cotton, peanuts, corn and oats.

The enrollment of the Cochran Colored Elementary and High School is 432. Of this number 305 pupils are in the Elementary department, 26 in the Junior High department, and 101 in the Senior High School department.

There are eight teachers in the Elementary department and six teachers in High School making a total of fourteen teachers, all of whom hold high levels of certification.

2. Period of Study.--This research was conducted during the 1959-1960 regular school year at the Cochran Colored Elementary and High School, Cochran, Georgia.
3. Method of Research.--The Descriptive-Survey Method of research, employing the techniques of the questionnaire, the structural interview, records, checklist and observation, was used to gather the data necessary for this proposed study.
4. Subjects.--The subjects involved in this study con-

¹ Irwin Johnson, Methods and Materials in School. Health Education (St. Louis: C.V. Mosby Company, 1956), p. 21.

stituted the educational personnel of the Cochran Colored Elementary and High School. This personnel consisted of 432 pupils, fourteen teachers, one principal, one custodian, one dietician and two cafeteria helpers.

5. Instruments.--The research instruments used to collect the necessary data for this study were: (a) specifically designed questionnaires, (b) documentary analysis of official school records, and (c) interviews with the school community population wherever indicated.
6. Criterion of Reliability.--The criterion of reliability for appraising the data was the accuracy of the responses of the subjects to the items on the questionnaire which constituted the source of the data.
7. Procedure.--The procedural steps used in the conduct of this research were as follows:
 1. Permission was requested and granted by the proper school officials to conduct the study.
 2. The literature pertinent to this study was reviewed, analyzed and summarized for inclusion in the thesis copy.
 3. A specifically designed questionnaire was constructed under competent direction of University staff members.
 4. The questionnaire was administered to the subjects that is the educational personnel of the Cochran Colored Elementary and High School who participated in the study.
 5. The data from the questionnaire were tabulated, analyzed and interpreted.
 6. On the basis of the findings; conclusions, implications and recommendations were formulated for inclusion in the thesis copy.

Summary of the Related Literature.--Significant excerpts from the theoretical and research literature on Health Educa-

tion are presented in the statements to follow:

1. Theories and Criteria-Grout states that Health Educational Principles should concern:
 - (a) The needs and interests of children and of their families and communities.
 - (b) Attention given to the psychological, sociological, cultural and economic factors which have a bearing on behavior.
 - (c) Sound health facts.
 - (d) Child instruction through participation in practical problem solving situations.
 - (e) Health teaching as an integral part of the school curriculum and school community health program.
2. Sharman states that the school health program should embrace a broad conception of health which includes mental and social health as well as physical health.
3. Turner is of the opinion that the basis of health work is that performed with each individual child. He further maintains that the constant supervision of the teacher will insure that no general classroom activities will be injurious to the health of the students.
4. A desirable development of school health education under the favorable influences of good examples of practices of health protection set by the schools and teachers themselves.
5. Brooks states that an effective health program should be planned by community leaders, local school staff as well as health authorities.
6. Children should be able to live healthfully while in school. Consideration should be given to social, physical, mental and emotional environment as well as many of the facilities needed.
7. Turner states that the significant emphasis of the modern school health program has been upon improving health practices of pupils. In another connec-

tion Turner states that health habits should be learned by practicing (doing) correct health habits.

8. N. E. Cutts states that a child's behavior in the classroom is frequently a sign of some maladjustment of his life out of school. It can also be a warning to the teacher of approaching mental ill health or delinquency.
9. Turner gives a logical sequence by which the health of the pupils can be maintained and even promoted; and the importance of the teachers being able to recognize signs of physical and mental health (or any departure therefrom).

Resume of Findings

Prefatory Statement.--The Summary of the basic findings of this study pertaining to the appraisal of the health facilities and program in the Cochran Elementary and High School, Cochran, Georgia, 1959-1960 is presented in the separate paragraphs, properly identified by captions and tables, immediately below.

Organization and Administration of the Health Program Table 1

Cochran Colored School has a person directly responsible for the administration and promotion of the health program. The school has an active Health Committee. This committee was composed of teachers, pupils, lay people, and sanitation personnel. The committee did not have among its members a physician, a dentist, or a nurse. The school's health committee helped plan, activate, and evaluate the health program. The personnel involved in the health program of the Cochran Colored High School had reasonable pre-service training.

Factors in the Evaluation of the Health Program Table 2

The school reported that it was using the varied evaluation techniques in measuring the effectiveness of its health program. The evaluation included the train-

ing of pupils to evaluate themselves by keeping anecdotal records, diaries, etc.

Basic Training of the Health Program

Table 3

The school reported that the school health personnel have adequate training in the area of health including mental and social health as well as physical education. The school did not have an In-Service Training Program in health. Health personnel pre- and post-planning meetings are held monthly throughout the school year as an attempt to promote the health of the pupils.

Program Planning

Table 4

The administrator reported that the school had an operative program in Health Education that coincided with the Community Health program. The school utilizes the services of the school health personnel student representatives from the parent-teachers association and of laymen from the committee.

The School Community Environment

Table 5

The school is progressing in its efforts to landscape and beautify the school ground. A thirty minute play period is given and each student is properly supervised.

Buildings

Table 6

The buildings were found to be in a good state of repair; there was an adequate number of other necessary buildings and separate lounges for teachers.

Sanitation

The school gets its water supply from the city, and this source of water is approved by the health department; treated and approved within a year. Drinking water facilities are suitable and are located inside the building. They are adjusted to the height and size of pupils using them according to age and grade-levels using them. Basins and toilets are very adequate.

Heating and Ventilation

Table 7

The school had a central heating system. The rooms

were all ventilated and free from drafts. There were thermometers in each classroom.

Lighting

Table 8

The school uses electric lights. The building is well lighted. Two way roller shades are used at the windows. The desks are arranged for minimum glare and maximum light. The tables, lighting cants, desks and other furniture are of natural wood finish. The walls are a pale green, dull finish (which does not produce a glare). The chalk boards are a medium green. The teachers are promoters of good health; (they stand away from windows while teaching so that pupils will not have to face windows (light) when looking at them (teachers)).

Classroom Arrangement and Cleanliness

Table 9

Janitorial services were available. The custodian realizes his importance in the general scheme for school sanitation and child welfare. Adequate equipment and supplies are provided.

Classrooms

The classrooms are cleaned and the desks are properly arranged. Growing plants are kept in each classroom. Provided in the classrooms are mirrors adjusted to the height of the children.

School Lunch Program

Table 10

The school has a cafetorium, (a room that is used both as a lunchroom and as an assembly room). The lunchroom has adequate facilities. The school is receiving Federal Aid for the school Lunch Program. The lunchroom is certified by the State Department of Public Health. The lunchroom personnel and student help must have physical examinations, training in sanitation and proper methods of handling food. Free lunches are given to children who need them. The goal of 80% or more participation in the lunchroom is not achieved. The lunchroom program was found to be bringing about a positive learning situation in that pupils are taught to wash their hands before eating; how to use properly flat-ware silver, to remain at the table until the group has finished eating, to practice the common courtesies in the lunchroom as well as other areas of the

community environment, and not to indulge in play immediately after a meal.

Scheduling the School Day and Promotion Policies Table 11

The data reveal that the school day was long enough to prevent too much hurry. Pupils were not overburdened with home-work and extra-class activities. Rest periods were also provided. Pupils are not retained unless they are the victims of excessive absenteeism; and fail to put forth special efforts to learn. The school is putting forth special efforts to show pupils and parents that it is ready to help in whatever healthful way possible in developing the pupils to the fullest of their abilities.

Personal Relationship

Table 12

For both the school and community the relationship indicated was "fair"; the relationship for principal and administration and principal and teachers indicated as "excellent"; and the relationship among the teachers as "good". It appears that the patterns of relationship school-community and home needed to be improved.

Program of Counseling

Table 13

The area of counseling is adequate in the educational program of the Cochran Colored School with the exception of one item; there is not a Visiting Teacher available. However, the old method of teacher-pupil and parent-teacher relationships in the more urgent cases has been helpful in making satisfactory adjustments in the area of behavior problems. The problems of school attendance, P.T.A. seminars, school news releases, etc.

Community Environment

Table 14

A healthy community is a necessity in order to develop and maintain health habits that are desirable and livable. The Cochran Colored School, realizing this principle, has met the following criteria: by promoting and stimulating an interest in (1) adequate safe water supply; flouridation of water, (2) proper sewage disposal, (3) proper garbage disposal, (4) insect and rodent control and (5) other needed public health protective measures.

Safety

Table 15

The school building is one story which has no need for

stairs except to enter the rostrum. These are provided with handrails and are lighted. There are treads on the stairways. The floors are in good repair.

Housekeeping and Maintenance

Table 16

The floors were in good repair; non-skid wax is used on all floors; all doors open outward; all combustible and inflammable materials are stored in fireproof containers; and there are regular inspections of electrical and heating equipment.

Safety on the Playgrounds

Table 17

Playground construction meets the standards. Play equipment is kept in good repair; and hazardous materials are kept off playgrounds. A person trained in First-Aid supervises the play periods. The school has a school patrol. The school buses meet Department of Public Safety Standards for vehicles and that of bus drivers having training in driver education.

Health Services

Tables 18, 19 & 20

The following services are received from the County Department of Health: health officer, nurse, and sanitarian. There is not a Dental Health Service in the program. The school personnel and the health department work well together. The nurse makes frequent visits. The teachers and nurse meet in conference after there is an examination of some pupil. The immunization standards are in line with those recommended by the State Department of Public Health. Records are kept of the visits and observation of children. The nurse visits the school once every month. The teachers are expected to have a physical examination including chest X-rays before entering school. The employees earn sick leaves. Most pre-school children have minor defects corrected before entering school.

First-Aid

Table 21

The equipment for first-aid is good. There is a clinic room. A cabinet is placed where it can be easily reached when needed. Transportation is provided by the principal, if there arises a need for a sick pupil to go home or to the doctor.

Civil Defense Program

Table 22

The Civil Defense Program is in accord with the State Program. It has taught the children what to do when disaster strikes. However, children are not required to wear identification tags.

Physical Education

Tables 23 & 24

There is a good physical education program in the school. It serves in accordance with the state program. The high school teacher who is trained in physical education works with the elementary group. Physical education is coordinated with the total health program. The play periods of thirty minutes each day are supervised.

Integration and Schedule for Health Instruction Tables 25 & 26

Health is integrated with other subjects. There are social studies, reading, arithmetic, physical education, art, music and science. A period of thirty minutes a day is given to health instruction.

Supplementary Materials

Table 27

In the school there is the usual array of such supplementary aid for the teaching of health as: films, charts, posters, exhibits, reference books, pamphlets, magazines, models and health department materials are processed through or housed in the library.

Activities Carried on in the School Health Program Table 28

Health teaching is done through such activities as: trips to dairies, markets, bakeries, waterworks, grocery stores, fire departments, health departments, special lectures, assembly programs, talks on health, Through medical examinations, and such programs as immunization, testing hearing, testing vision, using cumulative health records, school lunchroom program, morning inspection, safety on school buses, safety at school, safety in the home and in the community, fire drills, use of fire extinguishers, laboratory experiments, making a study of what children are eating, nutritional experiments with white rats, having children assume responsibility for regulating heating and ventilation to maintain temperatures of 68 to 70 degrees, having pupils adjust curtains and lights for best lighting effect, play activities of children and

planting a vegetable garden at home and at school. There could be some improvements made in activities as: hospitals, radio programs, clean-up campaigns, weighing and measuring children, dental examination and those activities not reacted upon as vision, teaching high school pupils how to drive a car, safety in the home, having children help keep grounds and buildings clean and attractive.

Health Habits

Table 29

There is an excellent program in personal health habits. The pupils were able to select adequate and balanced diets, eat regularly and properly, visiting the dentist twice yearly, and keeping themselves clean and well groomed.

Health Practices

Table 30

The school has a very good program in healthful practices which indicated that the child should remain at home when he has a communicable disease, maintaining sanitary conditions at home and school, selecting clothes suitable for weather conditions, working together cooperatively, being kind and thoughtful, and seeking scientific medical advice when ill rather than treating self with patent medicines.

Special Education

Table 31

There is no provision made for Special Education in the Health Program, however, there is a need for a program for Exceptional Children.

Lunch Room

Table 32

The school stated that the school lunchroom personnel were holders of health certificates, that menus were made by persons trained in nutrition. It also indicated that the school did not sell soft drinks and package foods.

Teacher Traits

Table 33

Most of the teachers of the Cochran Colored School possessed qualities of such a nature that the students should have been able to develop to the highest level of attainment in regards to health education. These traits would provide teaching and learning experiences

which would influence the habits, attitudes, and practices pertaining to individual and group health. After having been exposed to healthful school living, the students should have been able to plan the procedures and activities in relation to the school.

Teacher Training

Table 34

The area of preparation related to health education for these teachers ranked as follows: Child Development 8 or 57 per cent; Health Education in Elementary Schools and Child Behavior 6 or 42 per cent; Community Hygiene 5 or 35 per cent and Mental Hygiene 4 or 29 per cent. The training of the teachers in Health Education is such that would promote desirable habits, attitudes, and skills as well as a general knowledge of the boys and girls.

Teachers Philosophy of Discipline

Table 35

The teachers' philosophy of discipline is very favorable. The pupils should have been able to participate in the activities with desirable freedom in physical, mental and emotional health and other safety measures at school.

Disciplinary Controls and Individual Differences

Tables 36 & 37

The respondents to the items on the questionnaire indicate that improvement is needed in the areas of disciplinary controls and individual differences especially in the types of punishment, promotion policies; and some provisions should be made for the handicapped persons.

It appears that the school staff, and or planning committee, needs to take a look at the school policies, the present school program and the teachers' philosophies and re-plan a program of education that would meet the present-day demand of education in developing the pupils who will manifest desirable and useful attitudes, habits, skills, and knowledge.

Conclusion.--The analysis and interpretation of data

for this study seem to warrant the following conclusions:

1. That there is a person directly responsible for the administration and promotion of the health program

in the school.

2. That Cochran Colored School may be considered relatively safe from the physical hazards of plant and grounds layout.
3. That the janitorial services were adequate.
4. That the bus drivers are trained for their jobs.
5. That the lunchroom program receives Federal-Aid, operates on a self-sustaining, non-profit basis, and meets the State Standards.
6. That the instructional program is adequate.
7. That the services of a visiting teacher should be made available.
8. That the lighting and sanitation facilities at the Cochran Colored School were adequate and are conducive to a healthful school environment.
9. That the psychologic climate is conducive to mental health and emotional stability.

Implications.--The interpretations of the findings of this study appear to focus attention upon the following implications:

1. Healthful school living at the Cochran Colored School Cochran, Georgia, cannot be fully realized under the conditions and inadequacies found which are contrary to Healthful School Living and characterized in the definition of terms in Chapter One, such as:
 - a. A toilet that would accommodate a wheel chair patient should be provided.
 - b. That services of a visiting teacher should be provided.
 - c. Provisions should be made for an in-service training program in school health for all school personnel as part of the total school

program.

- d. Provisions should be made for testing vision, weighing and measuring children, and dental examinations.
- e. Provisions should be made for exceptional children designated as gifted, mentally retarded, and physically handicapped.
- f. Facilities should be provided for drivers education.

Recommendations.--As a result of the intensive scientific study of the Appraisal of the Health Facilities and Program at the Cochran Colored School, Cochran, Georgia, the recommendations below are made.

- 1. There should be some provisions made for the exceptional child: the gifted, the mentally retarded, and physically handicapped.
- 2. That a program be set up for testing vision, weighing and measuring children.
- 3. That a dental clinic be provided for the school population.
- 4. That all resources be explored in order to obtain the services of a visiting teacher.
- 5. That special facilities be made for handicapped individuals.
- 6. That the school should include a program of driver education.
- 7. That, an in-service program in health for teachers be included in the years planning.
- 8. That a follow-up be made of this study in order to improve the health program.

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APPENDIX .

AN APPRAISAL OF THE SCHOOL HEALTH PROGRAM

STATE DEPARTMENT OF EDUCATION

Atlanta 3, Georgia

County _____ Date _____

Name of School _____ Address _____

Type of School: Elementary: Enrollment _____ No. Teachers _____

Junior High: Enrollment _____ No. Teachers _____

High School: Enrollment _____ No. Teachers _____

Combination (1-12): Enrollment: _____
No. Teachers _____

Principal _____ Address _____

This is an effort to help schools evaluate and improve their health programs. It is based upon the belief that "Health is a state of complete physical, mental and social well being, and not merely the absence of disease or infirmity", and that Health Education is the sum of all the experiences that contribute to this condition of the body; and further, that the school health program should be concerned with all ages - pre-school, school, out-of-school youth, and adults. It is suggested that the principal with his faculty, pupils, public health personnel and lay people study these items together in several study-group meetings and indicate by check the actual conditions in their school. Then all, working together, should make every effort possible to improve the weak points found in the program.

I. ORGANIZATION AND ADMINISTRATION OF THE SCHOOL HEALTH PROGRAM

A. Is there a person directly responsible for the administration and promotion of the health program in your school? Yes _____ No _____

B. Is there an active school health committee: Yes _____ No _____

1. Are teachers members of this committee? Yes _____ No _____

2. Are administrators? Yes _____ No _____

3. Are pupils? Yes _____ No _____

4. Are lay people? Yes ___ No ___
 5. Is a physician included? Yes ___ No ___
 6. Is a dentist included? Yes ___ No ___
 7. Is a nurse included? Yes ___ No ___
 8. Sanitation personnel? Yes ___ No ___
 9. Does this committee meet regularly? Yes ___ No ___
 10. Does it help plan, activate and
 evaluate the health program in the
 school? Yes ___ No ___

a. Does the evaluation include:

- (1) Health knowledge tests? None ___
 Poor ___ Fair ___ Good ___ Excellent ___.
- (2) Health attitude tests? None ___ Poor ___
 Fair ___ Good ___ Excellent ___.
- (3) Observing the attitudes and practices
 of pupils:
- (a) in school? None ___ Poor ___ Fair ___
 Good ___ Excellent ___;
- (b) in home, whenever possible?
 None ___ Poor ___ Fair ___ Good ___
 Excellent ___;
- (c) in community, whenever possible?
 None ___ Poor ___ Fair ___ Good ___
 Excellent ___.
- (4) Interviews and conferences with pupils,
 parents, health personnel and other
 teachers? None ___ Poor ___ Fair ___ Good ___
 Excellent ___.
- (5) Training and encouraging pupils to
 evaluate themselves by keeping anecdotal
 records, diaries, etc.? None ___ Poor ___
 Fair ___ Good ___ Excellent ___.
- (6) When the above information is obtained
 is it used to improve the health program?
 None ___ Poor ___ Fair ___ Good ___ Excellent ___.

c. Do school personnel have training in the school
 health program?

1. All? Yes ___ No ___
 2. More than half? Yes ___ No ___
 3. Less than half? Yes ___ No ___
 4. None? Yes ___ No ___

5. Does this training include mental and social health as well as physical health? Yes ___ No ___
6. Do they feel that each has responsibilities in the school health program? Yes ___ No ___
- D. Is there an in-service training program in school health for all school personnel as part of total school program? Yes ___ No ___
 1. Study and planning during pre-and post-planning weeks? Yes ___ No ___
 2. Study groups during school year? Yes ___ No ___
- E. Is there a written program of health for your school? Yes ___ No ___
 1. Is this written program revised and improved at least annually? Yes ___ No ___
 2. Does the written program of health for your school conform to the county written program of school health? Yes ___ No ___
 3. Do school personnel and public health personnel jointly carry on the responsibility of the health program in schools? Yes ___ No ___
 4. In planning and writing the program of school health, did the following participate:
 - (a) School personnel, students and public health personnel? Yes ___ No ___
 - (b) P.T.A., school personnel and public health personnel? Yes ___ No ___
 - (c) Community, P.T.A., school personnel and public health personnel? Yes ___ No ___

II. SCOPE OF THE SCHOOL HEALTH PROGRAM

A. Healthful School - Community Environment

1. Grounds

- a. Suitable in size to meet state standards?
Poor ___ Fair ___ Good ___ Excellent ___.
- b. Landscaped for:
 - (1) beautification None ___ Poor ___ Good ___
Excellent ___.

(2) drainage None ___ Poor ___ Good ___
Excellent ___.

- c. Grass, flowers and shrubbery in proper places and well kept? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
- d. Are there objectionable commercial or industrial areas nearby creating excessive noise, dust or other hazards? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
- e. Are grounds clean and well kept? Yes ___ No ___

2. Buildings

- a. Attractive and in good state of repair? Poor ___ Fair ___ Good ___ Excellent ___.
- b. Adequate number of suitable classrooms? (Minimum 20 sq.ft. per pupil) Yes ___ No ___
- c. Adequate number of other necessary buildings? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
- d. Is there a separate rest room for teachers where they may relax during free periods? Yes ___ No ___
- e. Are buildings clean and well kept? Yes ___ No ___
- f. Ramp entrance that will accommodate wheel chair? Yes ___ No ___

3. Sanitation

- a. Is drinking water available on school grounds? Yes ___ No ___
 - (1) Is source of water approved by the Health Department? Yes ___ No ___
 - (2) Has it been tested and approved by the Health Department within the year? Yes ___ No ___
 - (3) Is the quantity sufficient? Yes ___ No ___
 - (4) Is the distribution system approved by the Health Department? Yes ___ No ___
- b. Are adequate sanitary-type drinking fountains available with heights adjusted to age groups using them? Yes ___ No ___
- c. Are there always plenty of paper towels? Yes ___ No ___
- d. Is either liquid soap or soap powder, properly dispensed, used for handwashing? Yes ___ No ___

- e. Are toilets approved by the Department of Public Health? Yes ___ No ___
- (1) Flush type ___ Pit ___ (check) Yes ___ No ___
- (2) Inside building? Yes ___ No ___
- (3) Provided with adequate number of commodes and urinals for the peak number of children using them? Yes ___ No ___
- (4) Kept clean? Yes ___ No ___ =
- (5) Free from marks? Yes ___ No ___
- (6) Well ventilated? Yes ___ No ___
- (7) Well lighted? Yes ___ No ___
- (8) Supplied with plenty of toilet paper? Yes ___ No ___
- (9) Provided with fixtures suitable in height and size for children using them? Yes ___ No ___
- (10) Is disposal by septic tank? Yes ___ No ___
- (11) Or by city sewerage system? Yes ___ No ___
- f. Are children trained in proper use and maintenance of toilets? Yes ___ No ___
- g. Is there a toilet that will accommodate a wheel chair patient? Yes ___ No ___

4. Heating, ventilation and lighting

- a. Adequate central heating system? Yes ___ No ___
- b. Or adequate jacketed stoves? Yes ___ No ___
- (1) Do stoves have fresh air inlet from outside? Yes ___ No ___
- c. Or properly vented individual gas heaters? Yes ___ No ___
- d. Can an adequate portion of windows be opened to provide sufficient ventilation? Yes ___ No ___
- e. Are the rooms free from drafts? Yes ___ No ___
- f. Is there an adequate supply of fresh air? Yes ___ No ___
- g. Is there an accurate thermometer in classrooms? Yes ___ No ___
- (1) Is it properly located? Yes ___ No ___
- h. Are there electric lights? Yes ___ No ___
- (1) Properly shielded? Yes ___ No ___
- (2) Do they give sufficient light to all parts of the room

(at least 20 foot candles of artificial light) Yes ___ No ___

i. Are translucent window shades used? Yes ___ No ___

(1) Are proper light controls used to shield the windows adequately, so arranged that light enters from upper part of windows? (check: diffusers ___ venetian blinds ___ two-way roller shades ___ Listed in order of preference) Yes ___ No ___

j. Are desks arranged for minimum of glare and maximum of light? (Pupils should not face light or work in shadows created by their bodies). Yes ___ No ___

(1) Are reading tables also thus placed? Yes ___ No ___

(2) Are desks and furniture natural wood? Yes ___ No ___

(3) Floors natural wood, or light green marbleized linoleum or asphalt tile and free from glare? Yes ___ No ___

k. Are walls and ceiling a light shade? Yes ___ No ___

(1) Are the walls without glare? Yes ___ No ___

(2) Woodwork and trim same as walls, darkened to 50% reflection factor with non-glossy finish? Yes ___ No ___

l. Do chalk boards have dull finish? (Should be green with a minimum of 20% light reflection) Yes ___ No ___

(1) May they be used without facing the light? Yes ___ No ___

(2) Do teachers stand away from windows when teaching so pupils will not have to face light when looking at them? Yes ___ No ___

5. Classroom arrangement and cleanliness

a. Is janitorial service provided? Yes ___ No ___

(1) Does he realize his importance

- in the general scheme for school sanitation and child welfare? Yes ___ No ___
- (2) Has he had special training for his job through the State Department of Education's custodial training program or elsewhere? Yes ___ No ___
- (3) Does he have supervision? Yes ___ No ___
- b. Are there adequate equipment and supplies for cleaning? Yes ___ No ___
- c. Is room arrangement orderly and attractive? Yes ___ No ___
- d. Are there a few appropriate, well placed pictures? Yes ___ No ___
- e. Are there growing plants in the rooms? Yes ___ No ___
- f. Is a mirror placed at such a height that all pupils can use it? Yes ___ No ___
- g. Are screens on all windows? Yes ___ No ___
- h. Are desks and seats movable? Yes ___ No ___
- i. Are desks and seats suitable in size for ages using them? Yes ___ No ___
- j. Are satisfactory facilities provided for wraps and other garments, either in classrooms or halls? Yes ___ No ___
- k. Are floors finished for beauty and ease of cleaning? Yes ___ No ___

6. School Lunch

- a. Does the school have adequate facilities for a school lunch program? Yes ___ No ___
- (1) Is the school lunch program receiving Federal Aid? Yes ___ No ___
- (2) Is the school refraining from selling soft drinks and packaged foods? Yes ___ No ___
- (3) Is the lunch room inspected regularly by the Department of Public Health? Yes ___ No ___
- (4) Are physical examinations required for school lunch personnel and student help? Yes ___ No ___
- (5) Do school lunch personnel have training in sanitation and proper methods of food handling?

All Yes No
 Few Yes No
 None Yes No

- b. Do all children eat in lunch room? Yes No
 (1) Do all children eat lunch? Yes No
 (2) Are all children provided a hot lunch? Yes No
 (3) Are 80% or more of the children participating in the lunch program? Yes No
 (4) Is anything being done to increase the participation in the lunch program? Yes No
 (5) Are the children who bring packed lunches given an opportunity to eat in the dining room? Yes No
 (6) Is pasteurized milk provided for every child daily? Yes No
 (7) Are free meals given to children who need them? Yes No

- c. Is 20 minutes or more allowed for children to eat lunch exclusive of time consumed in washing hands, standing in line? Yes No
 (1) Are all children encouraged to remain at the table until each child has had ample time to eat lunch? Yes No
 (2) Are children allowed adequate time to wash hands before eating? Yes No
 (3) Do children return immediately to classrooms from lunchroom? Yes No

- d. Is there evidence that the school lunch program is bringing about positive learning experiences to pupils either directly or through classroom integration? Yes No

7. Organization and administration of the school

- a. Is the school day long enough to prevent too much hurry? Yes No
 b. Is there enough time given for rest, relaxation, play? Yes No
 c. Are pupils overburdened with home work and extraclass activities? Yes No
 d. Are examinations, marks, reports to parents emphasized to point where children are subjected to undue amount of fear of failure? Yes No -

- e. Does the method of promotion take into consideration the total development of the pupil, rather than merely his knowledge of subject matter? Yes ___ No ___
- f. Are the relations between:
- (1) School and Community? Poor ___ Fair ___ Good ___ Excellent ___.
 - (2) School and homes? Poor ___ Fair ___ Good ___ Excellent ___.
 - (3) Principal and administration? Poor ___ Fair ___ Good ___ Excellent ___.
 - (4) Principal and teachers? Poor ___ Fair ___ Good ___ Excellent ___.
 - (5) Teachers? Poor ___ Fair ___ Good ___ Excellent ___.
- g. Is there a program of counseling? Yes ___ No ___
- (1) Is there a trained counselor? Yes ___ No ___
 - (2) Is he trained in mental health? Yes ___ No ___
- h. Are services of Visiting Teacher available? Yes ___ No ___
- (1) Has this person had special training for the job? Yes ___ No ___
 - (2) Are these services used to remove the causes for:
 - (a) Non-attendance? Yes ___ No ___
 - (b) Poor attendance? Yes ___ No ___
 - (c) Behavior problems? Yes ___ No ___

8. Community environment

- a. Does the school promote and stimulate interest in:
- (1) Adequate safe water supply? Yes ___ No ___
 - (a) Fluoridation of water Yes ___ No ___
 - (2) Proper sewage disposal? Yes ___ No ___
 - (3) Proper garbage disposal? Yes ___ No ___
 - (4) Insect and rodent control? Yes ___ No ___
 - (5) Other needed public health protective measures? Yes ___ No ___

9. Safety

- a. Are all stairways safe? Yes ___ No ___
- (1) Hand rails on all stairs in good repair? Yes ___ No ___
 - (2) Safety treads on all steps? Yes ___ No ___
 - (3) Bottom and top steps painted in contrast? Yes ___ No ___

- (4) Stairs and landings well lighted? Yes ☐ No ☐
- b. Are corridors safe? Yes ☐ No ☐
- (1) No projections? Yes ☐ No ☐
- (2) No loose plaster? Yes ☐ No ☐
- (3) Floor boards in good repair? Yes ☐ No ☐
- c. Is non-skid wax used on all floors? Yes ☐ No ☐
- d. Do all doors open outward? Yes ☐ No ☐
- e. Are all combustible and inflammable materials stored in fire-proof containers? (grease rags, oily mops, paper)? Yes ☐ No ☐
- f. Is the heating unit checked regularly for unvented gases and fire hazards? Yes ☐ No ☐
- g. Is the electrical circuit checked regularly for overloading and other hazards? Yes ☐ No ☐
- h. Does the fire protection equipment meet community fire regulations? Yes ☐ No ☐
- (1) Are they inspected regularly by the Fire Department? Yes ☐ No ☐
- i. Does playground construction meet safety standards? Yes ☐ No ☐
- j. Play equipment kept in good repair? Yes ☐ No ☐
- k. Are hazardous materials kept off playground, such as nails, broken glass, stone, etc.? Yes ☐ No ☐
- l. Is there a teacher trained in first aid designated as supervisor of all play periods? Yes ☐ No ☐
- m. Is there a school patrol? Yes ☐ No ☐
- n. Do all school busses meet Department of Public Safety standards? Yes ☐ No ☐
- (1) Drivers have training in driver education? Yes ☐ No ☐
- o. Have bicycle safety program? Yes ☐ No ☐
- p. Fire escapes meet state requirement? Yes ☐ No ☐

B. Health Service

1. Is there a Department of Public Health in your county? Yes ☐ No ☐
- a. Does it have a (check): Health Officer ☐ Nurses ☐ Engineer or Sanitarian ☐ Dental Hygienist ☐ Dental Clinic ☐.

2. Does a close working relationship exist between your school and the local health department? Yes ___ No ___
3. Do local official and voluntary agencies participate in the school health program? Yes ___ No ___
4. Do teachers and public health nurse participate in teacher-nurse conference when public health nurse visits school? Yes ___ No ___
5. Do teachers do periodic "teacher observations" of children? Yes ___ No ___
 - a. Do teachers keep up-to-date notes of "teacher observations" and transfer them with other records (School Health Form No. 2)? Yes ___ No ___
 - b. Are your immunization standards in line with those recommended by the State Department of Public Health? Yes ___ No ___
 - (1) Record of sickness that causes absenteeism? Yes ___ No ___
6. Does the school receive reports of the visits of health officer? Yes ___ No ___
 - a. Reports of visits of other public health personnel? List _____ Yes ___ No ___
7. Is a health examination, including chest x-ray, required of all school personnel before employment? Yes ___ No ___
 - (a) If not, which ones? _____ Yes ___ No ___
 - (b) Periodically every two years thereafter? _____ Yes ___ No ___
8. Is there a program for health of school employees? Yes ___ No ___
 - a. Do employees earn sick leave? Yes ___ No ___
 - b. Is provision made for employee health insurance? Yes ___ No ___
9. Are preschool children examined and remediable defects corrected before entering school, including dental defects? Yes ___ No ___
10. First Aid
 - a. Is there a health suite? Yes ___ No ___
 - (1) Does it contain a special room for the care of the sick? Yes ___ No ___
 - (2) Does this suite meet standards of Building Code? Yes ___ No ___
 - b. Is there a first aid cabinet? Yes ___ No ___

- (1) Is this cabinet easily accessible in time of accident? Yes ___ No ___
- (2) Do you check contents weekly and refill if needed? Yes ___ No ___
- (3) Is someone trained in first aid designated to be called for all serious accidents? Yes ___ No ___
- c. Are all teachers trained in first aid? Yes ___ No ___
- 11. Plans for sick children
 - a. Do you isolate sick children? Yes ___ No ___
 - b. Do you have plans for transporting them to:
 - (1) home? Yes ___ No ___
 - (2) hospital? Yes ___ No ___
 - (3) doctor? Yes ___ No ___
- 12. Civil Defense
 - a. Does your school have an active civil defense program? Yes ___ No ___
 - b. Is the school program of civil defense in accord with the state program of civil defense? Yes ___ No ___
 - c. Does every child wear an identification tag? Yes ___ No ___
 - d. Has every child received instructions as to where to go when disaster hits? Yes ___ No ___
 - e. Has every child received instructions as to what to do and what precautions should be observed when disaster strikes? Yes ___ No ___

C. Physical Education and Recreation

- 1. Is the State Law regarding physical education complied with? Yes ___ No ___
- 2. In Elementary School
 - (a) By providing a program of physical education and recreation for all children? Yes ___ No ___
 - (b) Teaching done by classroom teachers? Yes ___ No ___
 - (c) Have they had training in physical education? Yes ___ No ___
 - (d) Does the physical education teacher in high school help the elementary teachers? Yes ___ No ___
 - (e) Is physical education coordinated with the total school health program? Yes ___ No ___

(f) Is this a comprehensive instructional program planned progressively to promote:

- (1) The learning of motor skills?
None ___ Poor ___ Fair ___ Good ___
Excellent ___
- (2) The providing of sufficient physical activity for normal growth and development? None ___
Poor ___ Fair ___ Good ___ Excellent ___
- (3) The teaching of games and sports for recreational use? None ___ Poor ___
Fair ___ Good ___ Excellent ___
- (4) The teaching of arts and crafts for recreational purposes? None ___
Poor ___ Fair ___ Good ___ Excellent ___

g. Does the program provide activities including:

- (1) Games, utilizing the fundamental activities of running, jumping, throwing, striking, dodging, falling and catching? None ___ Poor ___ Fair ___
Good ___ Excellent ___
- (2) Rhythmic activities suited to the age of the child? None ___ Poor ___ Fair ___
Good ___ Excellent ___
- (3) Stunts and self-testing activities? None ___ Poor ___ Fair ___ Good ___
Excellent ___
- (4) Activities requiring self-expression, self-direction and group organization? None ___ Poor ___ Fair ___ Good ___
Excellent ___
- (5) Modified activities suited to the abilities of the physically handicapped? None ___ Poor ___ Fair ___ Good ___ Excellent ___
- (6) Intramural competition in sports and games adapted to age levels? (No interscholastic contests for children of these ages?) None ___ Poor ___ Fair ___
Good ___ Excellent ___
- (7) Music (singing, piano, etc.) None ___
Poor ___ Fair ___ Good ___ Excellent ___
- (8) Dramatics, hobbies, etc? None ___
Poor ___ Fair ___ Good ___ Excellent ___

h. Time allotment:

Daily period at least 30 minutes (most desirable) exclusive of lunch time and recess?

Yes ___ No ___

Three times per week?

Yes ___ No ___

Once a week?

Yes ___ No ___

3. In High School

- a. By providing a program of physical education and recreation for all pupils? (band, chorus, military should not be substituted for physical education) Yes ___ No ___
- b. Is physical education coordinated with the total school health program? Yes ___ No ___
- c. Is the size of classes in keeping with that of other high school classes? Yes ___ No ___
- d. Are classes taught by teachers well trained in total school health program with special emphasis in physical education? Yes ___ No ___
 - (1) Women teachers for girls? Yes ___ No ___
- e. Does this program provide opportunity for the promotion of normal growth through a wide range of activities, such as?
 - (1) Free and individual play? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
 - (2) Sports and games? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
 - (3) Self-testing activities? None ___ Poor ___ Good ___ Excellent ___.
 - (4) Stunts and tumbling, achievement tests in sports, and fundamental skill tests? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
 - (5) Swimming and life saving? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
 - (6) Prevention of fatigue through rest and relaxation? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
 - (7) Remedial and adapted sports? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
 - (8) Adequate program of intramural athletics for junior high school students and all girls? (No interscholastic contests for children under 13 years of age.) None ___ Poor ___ Fair ___ Good ___ Excellent ___.
 - (9) Intramural and interschool athletics for boys properly coached and supervised by teachers trained in total school health program with major in physical education? None ___ Poor ___ Fair ___ Good ___ Excellent ___.

- (a) Are these programs in line with recommendations in New School Health Guide?
- (b) Is a physician present at each interscholastic contest? Yes ___ No ___
- (10) Is the intramural and interscholastic athletic program for girls in line with that recommended in the New State School Health Guide? Yes ___ No ___
- (11) Rhythmic fundamentals? None ___ Poor ___ Fair ___ Good ___ Excellent ___
- (12) Co-educational and co-reational activities? None ___ Poor ___ Fair ___ Good ___ Excellent ___
- (13) Properly dressed for all activities? None ___ Poor ___ Fair ___ Good ___ Excellent ___
- (14) Take showers following activities? None ___ Poor ___ Fair ___ Good ___ Excellent ___
- (15) Camping, hiking and outing? None ___ Poor ___ Fair ___ Good ___ Excellent ___
- (16) Arts and crafts? None ___ Poor ___ Fair ___ Good ___ Excellent ___
- (17) Music (singing, piano, etc)? None ___ Poor ___ Fair ___ Good ___ Excellent ___
- (18) Dramatics, hobbies? None ___ Poor ___ Fair ___ Good ___ Excellent ___
- f. Facilities and Equipment
- (1) Does your school have a gymnasium? Yes ___ No ___
- (2) Is there one piece of play material per 8 children (i.e., soccer balls, playground balls, bats, rackets, basketballs, etc)? Yes ___ No ___
- (3) Does your school have a locker room which provides:
- (a) A locker for each child participating in physical education program? Yes ___ No ___
- (b) Adequate shower facilities for physical education classes? Yes ___ No ___
- (c) Adequate toilet facilities Yes ___ No ___
- (4) Does your school have equipment for weighing and measuring pupils? Yes ___ No ___

- (5) Does your school have adequate improved play space? Yes ___ No ___
- g. Time Allotment
- (1) Does each pupil in high school participate in a period of physical activity comparable in length to other high school classes? Yes ___ No ___
- Once each day? (desirable) Yes ___ No ___
- Three times per week? Yes ___ No ___
- Once per week? Yes ___ No ___

D. Health Instruction

1. Is health instruction integrated into the teaching of all subjects in:
- a. Elementary Schools? Yes ___ No ___
- (1) Check subjects: Reading ___
 Language ___ Science ___ Social ___
 Science ___ Art ___ Music ___
 Physical Education ___ Math ___
- b. High School? Yes ___ No ___
- (1) check subjects: Biology ___
 General Science ___ Chemistry ___
 Physics ___ Physical Education ___
 Homemaking ___ Agriculture ___
 English ___ Math. ___ Social Studies ___
 Military ___ Music ___ Art ___
 Commercial ___.
2. Is instruction given in the facts concerning the effects of alcohol on:
- a. The Body? Yes ___ No ___
- b. Behavior of the individual? Yes ___ No ___
- c. Economic conditions? Yes ___ No ___
- d. Family relations? Yes ___ No ___
- e. Civic responsibilities? Yes ___ No ___
- f. Are teachers trained in alcohol education? Yes ___ No ___
3. Is driver education offered in high school? Yes ___ No ___
- a. Approved by State Department of Education? Yes ___ No ___
4. Is instruction in safety measures included in the total school health program? Yes ___ No ___
- a. Are records of accidents kept, giving location, cause, and extent of injury? Yes ___ No ___
- b. Are fire drills held as part of safety instruction? Yes ___ No ___

- c. Are buildings and grounds checked regularly for safety hazards as part of instruction program? Yes ___ No ___
5. Is a definite period set aside for health instruction in:
- a. Elementary School (7th-8th grades)? Yes ___ No ___
- b. In High School? Yes ___ No ___
- (1) Does this meet requirement of one unit of health instruction as outlined in Curriculum Framework for Georgia Schools and in New Georgia School Health Guide
- (a) With at least one semester daily (more is desirable) in the ninth grade? Yes ___ No ___
- (b) At least one semester daily (more is desirable) in the twelfth grade? Yes ___ No ___
- (c) Is this instruction done by teachers who are trained in total school health program with special emphasis on health instruction, comparable in quantity and quality to that required by teachers in other areas? Yes ___ No ___
- c. Is this instruction in elementary and high school based upon the needs, interests, and abilities of students as determined by:
- (1) Health examinations? Yes ___ No ___
- (2) Health practices? Yes ___ No ___
- (3) Health records? Yes ___ No ___
- (4) Teacher observations, etc.? Yes ___ No ___
- Does it include
- (1) Health problems of school? Yes ___ No ___
- (2) Health problems of community? Yes ___ No ___
- d. Instruction in mental health included? Yes ___ No ___
- e. Instruction in dental health included? Yes ___ No ___
- f. Instruction in first aid given to all students? Yes ___ No ___
- g. Do teachers and pupils plan together health instruction? Yes ___ No ___
- (1) Health department personnel participate in this planning? Yes ___ No ___
6. Is the health instructional program planned as part of the total school health program? Yes ___ No ___

a. Is it written into the total health program? Yes ___ No ___

7. Are other materials than textbooks used, as: (check) Films ___ Charts ___ Posters ___ Exhibits ___ Reference Books ___ Pamphlets ___ Magazines ___ Models ___ Materials available from local health department ___
- a. Is there adequate health material available in the school library? Yes ___ No ___
 (1) References for teachers? Yes ___ No ___
 (2) References for pupils? Yes ___ No ___
8. Is any health teaching done through such activities as: (check) trips to dairies ___ market ___ bakery ___ water works ___ grocery store ___ fire department ___ health department ___ hospitals ___ radio programs on health ___ helping in community clean-up campaigns ___ medical examinations ___ immunizations ___ weighing and measuring children ___ dental examinations ___ testing hearing ___ testing vision ___ using the cumulative health records ___ school lunchroom program ___ Morning inspections ___ teaching high school pupils how to drive a car ___ safety on school bus ___ safety at school ___ safety in community ___ safety in homes ___ fire drills ___ use of fire extinguishers ___ laboratory experiments ___ making a study of what children are eating ___ nutritional experiments with white rats ___ having pupils assume responsibility for regulating heating and ventilation to maintain temperature 68 to 70 degrees ___ having pupils adjust curtains and lights for best lighting effects ___ play activities of children ___ having children help keep grounds and buildings clean and attractive ___ planting of vegetable gardens at home ___ at school ___?
9. Is emphasis of health teaching directed to the formation of intelligent behavior and proper attitudes rather than knowledge for knowledge's sake, as evidenced by pupils:
- a. Selecting adequate and balanced diets, when choices can be made at school and elsewhere? Yes ___ No ___
- b. Eating regularly and properly? Yes ___ No ___
- c. Drinking plenty of water daily? Yes ___ No ___
- d. Visiting dentist twice yearly and at other times when needed? Yes ___ No ___
- e. Brushing teeth properly before breakfast and after each meal? Yes ___ No ___

- f. Keeping their person clean and well groomed? Yes ☐ No ☐
- g. Practicing proper toilet habits? Yes ☐ No ☐
- h. Washing and drying hands with paper towels before meals? Yes ☐ No ☐
 (1) After visits to toilet? Yes ☐ No ☐
- i. Playing outdoors except during inclement weather? Yes ☐ No ☐
- j. Working, resting, and relaxing at proper periods and getting proper amount of sleep? Yes ☐ No ☐
- k. Practicing good posture habits? Yes ☐ No ☐
- l. Taking proper care of eyes, ears, teeth? Yes ☐ No ☐
- m. Remaining at home when attacked with colds or other communicable diseases? Yes ☐ No ☐
- n. Helping to keep classrooms and other parts of buildings and grounds clean and attractive? Yes ☐ No ☐
- o. Helping to keep building properly ventilated and properly lighted? Yes ☐ No ☐
- p. Helping to keep seats properly adjusted to needs of pupils? Yes ☐ No ☐
- q. Observing proper safety rules at school? Yes ☐ No ☐
 On streets? Yes ☐ No ☐
 Highways? Yes ☐ No ☐
 In homes? Yes ☐ No ☐
- r. Participating in monthly fire drills? Yes ☐ No ☐
- s. Showing interest in their growth and reasons for it? Yes ☐ No ☐
- t. Working together cooperatively and being kind and thoughtful? Yes ☐ No ☐
- u. Having knowledge of and wearing and caring for proper clothing? Yes ☐ No ☐
- v. Knowing how and properly caring for sick in home? Yes ☐ No ☐
- w. Knowing how and administering first aid properly? Yes ☐ No ☐
- x. Seeking scientific medical advice when ill rather than treating self with patent medicines or follow advice of unqualified person? Yes ☐ No ☐
- y. Influencing in homes: Screening? Yes ☐ No ☐
 Providing better toilet facilities? Yes ☐ No ☐
 Better health habits of other members of family? Yes ☐ No ☐

Improving water supply?	Yes ___ No ___
Helping to make home more attractive?	Yes ___ No ___

E. Special Education

1. Does the school provide a program for exceptional children (mentally gifted, mentally retarded, with physical defects, emotionally disturbed or socially maladjusted)? Yes ___ No ___
 a. Which programs are included? Yes ___ No ___
2. Is this program approved by State Department of Education? Yes ___ No ___
 a. Which programs are needed? Yes ___ No ___

If you need help with the program for exceptional children write:

SUPERVISOR of Education of Exceptional Children
 State Department of Education
 Atlanta 3, Georgia.

If you need help in interpreting this APPRAISAL FORM and/or in improving your school health program write:

DIRECTOR of School Health Division,
 State Department of Public Health,
 Atlanta 3, Georgia

or

COORDINATOR of Health, Physical Education
 and Recreation,
 State Department of Education,
 Atlanta 3, Georgia.

A STUDY OF HEALTHFUL SCHOOL LIVING IN THE COCHRAN COLORED
SCHOOL, COCHRAN, GEORGIA, 1959-1960

A Questionnaire-Checklist

This Questionnaire-Checklist on Healthful School Living
used in conjunction with the "An Appraisal of the School
Health Program" is in three parts:

- Part I - The Lunchroom Program
- Part II - Observational Procedures, that is Teacher
Traits
- Part III - Pupil-Teacher Relationship, Administrative
Procedure, and "Psychologic Climate".

Part I

Aspects of the Lunchroom Program

Directions: Check the findings for each school.

1. Only persons holding health certificates handle
the lunchroom food ()
2. Students or teachers without health certificates
help ()
3. Menus made by a trained person in nutrition . ()
4. Menus made by a person who has no training in
nutrition ()
5. Sell Candy ()
6. Sell soft drinks ()

Part II

Check List for Direct Observational Procedures. A Study of Healthful School Living in the Cochran Colored School, Cochran, Georgia.

Name of School: _____

Number of Elementary Teachers _____

Directions: Check the findings that seem applicable to each teacher

1. Teacher has a neat, clean appearance ()
2. Alert, cheerful, and enthusiastic ()
3. Pleasing facial expression ()
4. Well modulated voice ()
5. Shrill voice (or loud voice) ()
6. Uses gestures and facial expressions to call attention to pupils shortcomings ()
7. Helpful, calm, unruffled, patient and soothing ()
8. Sarcastic, nervous, critical and curt ()
9. Helps in a kind but business like way ()
10. Gets order by promising punishment ()
11. Ignores children's complaints ()
12. Decidedly clear in directions ()
13. Enjoys fun with class (sense of humor) ()
14. Comments on efforts ()
15. Calls attention to mistakes kindly ()
16. Resentful of interruptions ()
17. Gratefully receives criticisms ()

18. Resents criticisms ()
19. Activities are teacher directed ()
20. Children seem unrestrained ()
21. All pupils in the same grade doing the
same thing ()
22. Activities are varied according to
group and individual needs and
interests ()

Part III

To be filled in by teachers in the Cochran Colored
School of Bleckley County, Georgia.

I. Pupil-Teacher Relationship

A. Teacher Training

1. Health Education	<u>No of Hours</u>
a. Health Education in Elementary and High School	_____
b. Community Hygiene	_____
c. Child Development	_____
d. Mental Hygiene	_____
e. Child Behavior	_____
f. Others (List Titles)	_____
_____	_____
_____	_____

B. Discipline

1. Teachers Philosophy of Discipline

- a. The child is viewed as an organism resp-
onding to the world according to his
powers and capacities, hence the child is
an individual to be developed ()

- b. The teacher must put forth effort to correct what are regarded as inborn traits or inherent urges to misconduct, hence the child is an individual to be corrected ()

2. Formulating Standards

- a. The child helps to formulate standards ()
- b. The teacher formulates standards for the child ()

3. Judging Standards

- a. The child is the judge of standards . ()
- b. The child is the judge, with others, of the usefulness and merit of standards ()

4. Disciplinary Controls

- a. The child is guided by social approval or disapproval ()
- b. The child is guided by an idea . . . ()
- c. The child is guided by fear ()
- d. The child is guided by development of a willingness to accept responsibility for an act ()

5. Punishment

- a. Corporal Punishment ()
- b. Make the child stand for a long time ()
- c. Avoid using recreational or recess period ()
- d. Deprive the child of recreational or recess periods ()
- e. Use none of these ()

C. Individual Differences

1. Is the same lesson plan used for all pupils who are in the same grade? . . .Yes__No__
2. Are pupils given a chance to excel in some one thing at same time? . . .Yes__No__
3. Are promotions granted on knowledge of subject matter?Yes__No__
4. Are report cards and grades emphasized?Yes__No__
5. Are special provisions made for handicapped children?Yes__No__

D. Fatigue

1. Type of Schedule
 - a. Follow a subject matter schedule (Definite hour for each subject)? Yes__No__
 - b. Follow a flexible daily schedule (Based on life related situations of the child)?Yes__No__
 - c. Emphasizes basic drills?Yes__No__
 - d. Allow time for projects and units in all subjects?Yes__No__